



RSSDI NEWS



THE OFFICIAL BULLETIN OF **RSSDI**



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MESSAGE FROM THE RSSDI PRESIDENT

Dr. Anuj Maheshwari



President's Message: Scaling Our Impact from Schools to Nation

Dear Colleagues,

As we move into May, the rising temperatures bring a timely reminder of the clinical challenges our patients face—specifically the risk of dehydration and hyperviscosity in the setting of severe hyperglycemia. On the occasion of World Hypertension Day (May 17th), let us renew our focus on the critical interplay between metabolic and cardiovascular health.

I must share you key updates on our society's progress and the road ahead:

1. Clinical Excellence: 2026 Indian Consensus Guidelines for Management of Diabetes

The wait is nearly over which has been a bit longer this time. The Guidelines Committee is working at an accelerated pace, and I am pleased to confirm that the revised RSSDI Consensus Statement for management of Diabetes in India will be released this year preferably in next 1-2 months in our official Journal IJDDC. These guidelines/Consensus statement will actually serve as the definitive benchmark for diabetes care tailored to the Indian phenotype.

2. Expanding Our Outreach

- Rural Initiative: Our Rural Outreach Program is now live in several states. I appeal to the leadership in remaining states to initiate this program using the established RSSDI SOPs. If you face any logistical hurdles, please reach out to me directly.
- School Outreach Taskforce: We have launched a mission to educate the youth on obesity, nutrition, and GDM prevention. By targeting the next generation, we are attacking the diabetes epidemic at its roots.

3. "Diabetes Distilled": Nationwide Launch

Following its success in Uttar Pradesh, the National Executive has approved the nationwide expansion of our PG and Student Outreach Program, "Diabetes Distilled."

I encourage all Medical Colleges and Institutes to host this program "Diabetes Distilled" at the platform of RSSDI. A standardized PowerPoint presentation is available via RSSDI Headquarters to ensure uniform, high-quality training for postgraduates across all specialties.

4. Fueling Innovation: Research Grants

RSSDI remains committed to fostering indigenous research. We invite you to submit your research projects via our Online Grant Portal. All submissions will be evaluated by the Research Committee based on merit and potential for clinical impact.

5. Save the Date: RSSDI Bengaluru 2026

Preparation is in full swing for the RSSDI Annual Conference 2026 in Bengaluru (Third week of November). This will be our largest gathering yet, focused on collaborative excellence. Together, we are not just treating diabetes; we are redefining the healthcare landscape of India.

With warm regards,

Prof. Anuj Maheshwari
MD, MACP

MESSAGE FROM THE RSSDI PRESIDENT ELECT

Dr. Sunil Gupta

It is a matter of great pride and satisfaction to witness the continued academic growth and expanding reach of our society. The introduction of this newsletter marks an important milestone in our journey toward promoting excellence in diabetes care, education, and research across India.

Diabetes today is not merely a disease but a major public health challenge affecting millions of individuals and families. Addressing this challenge requires scientific rigor, collaborative thinking, and a commitment to continuous learning. Through this publication, we aim to create a meaningful platform where clinicians, academicians, and researchers can share valuable experiences, innovations, and evidence-based practices.

I sincerely believe that knowledge shared is knowledge multiplied. This newsletter will strengthen communication among our members and encourage academic interaction that can ultimately improve patient care outcomes.

I congratulate the editorial board and contributors for their dedicated efforts in launching this initiative. May this publication continue to inspire scientific thought, professional growth, and meaningful collaboration.

Dr. Sunil Gupta President Elect, RSSDI



MESSAGE FROM THE RSSDI Newsletter, Editorial Team

Dear Members

As we enter the intense summer month of May, when much of India experiences soaring temperatures and demanding days, the spirit and energy of the RSSDI family continue to remain inspiringly active and committed. The month of April beautifully reflected this dedication through the successful State Chapter Conferences of Gujarat, Telangana, and Kerala — gatherings that combined academic excellence with warmth, friendship, and a shared mission toward better diabetes care.

Each chapter brought its own unique strength and identity. Gujarat presented a truly power-packed academic feast with vibrant scientific discussions and practical learning. Telangana highlighted an important reminder that diabetes care in rural India requires not only science, but also empathy, understanding, and human connection. Kerala once again demonstrated its rich tradition of evidence-based medicine, thoughtful academic exchange, and clinical leadership.

Beyond the lecture halls, these conferences represented something deeper — mentorship, collaboration, and the joy of colleagues coming together with a common purpose. The enthusiasm of faculty members, young researchers, postgraduate students, and organizing teams deserves heartfelt appreciation.

As we move through the busy and challenging summer season, I warmly encourage all State Chapters and members to continue their academic and public health initiatives with the same passion and resilience. We invite you to share reports, photographs, awareness activities, CMEs, workshops, outreach programs, and achievements conducted during May 2026 for inclusion in the RSSDI Newsletter.

Your work not only documents progress but also inspires fellow members across the country.

Together, let us continue building a stronger, compassionate, and academically vibrant RSSDI community.

With warm regards,

Dr. Lotika Purohit
Editor
RSSDI Newsletter



Dr. Lotika Purohit



Dr. Anubha Verma



Dr. Aarathi Kannan



Dr. Bharat Kukreja



Dr. Ajay Singh



Dr. Shambo Samajdar



Dr. Vinay Dhandhan



Dr. Vipul Chavda



Dr Vijaya Kumar G.
National EC Member, RSSDI

Insider Info : Know Your EC Member

1. Your journey with diabetes care?

I was originally interested in surgery. I got PG in diabetology in erstwhile Madras University. The elder doyens in our profession asked me to jump in. The best decision of my life was following them.

2. What's your go-to hobby?

Spending time with family, watching cricket and you tube on tv. Enjoying my time in our free clinic every Tuesday afternoon.

3. Hidden talent?

Teaching is my passion. I am not aware of any hidden talent except interacting and giving opportunities to the next generation of diabetes HCPs.

4. Professional Insights

1. Current role and passion project?

I am a managing trustee in 3 charitable organizations for taking care health and education for the poor and needy. I am seriously into RSSDI Rural Outreach program which I am working on that.

2. RSSDI's impact on your practice?

Excellent. RSSDI shaped me a better practitioner with practical and pragmatic approach. RSSDI gave me an opportunity to be part of Recommendations and and teaching the same to all the Hcps.

3. Achievement you're proud of?

Milestones – Yet to achieve

5. Vision for RSSDI

1. How can we improve diabetes care in India?

95 %of our diabetics are treated by Gps. Educating them for better diabetes care would transform diabetes care in our country

2. Your contribution to RSSDI's mission?

1.As Chairman of Tamil Nadu RSSDI earlier, started 2 Rural out reach programs and started 5 research projects. Now need to plan bigger contributions and hopefully shall be able to that.

3. Message for RSSDI members?

My message is to work as responsible Hcps in diabetes, keep updating. We are in an excellent situation where affordable therapies are available to prevent and revert many complications

RSSDI Rural Outreach Village Adoption Program



- The Research Society for Study of Diabetes in India (RSSDI) Rural Outreach Village Adoption program aims to reduce the rising burden of diabetes, obesity, and hypertension in rural India by adopting 100+ villages for targeted screening, education, and, in collaboration with Rotary India, providing access to care. RSSDI doctors and state chapters conduct regular health screenings, train local healthcare staff, and promote healthy lifestyles to improve outcomes for undiagnosed or undertreated rural populations.
- **Village Adoption Goal:** RSSDI aimed to adopt 100 remote villages across India to provide, for example, diagnostic kits, glucometers, and BP apparatus to rural areas.
- **Targeted Screenings & Care:** Doctors conduct mass screenings, fill community-based assessment checklists (CBAC), and refer patients with non-communicable diseases (NCDs) to primary health centers.
- **Education and Prevention:** The program offers educational sessions to rural residents on dietary habits, exercise, and lifestyle changes to prevent complications.
- **Knowledge Transfer:** Acting as a knowledge partner, RSSDI trains local medical and paramedical staff to ensure sustainable, high-quality diabetes care in these villages.

Villages Adopted

- | | |
|---|--|
| <ul style="list-style-type: none">• Thamaraiyakam Village near Chennai• Vakkampatti Village, Dindukal District• Vallimalai village, Vellore• Safedabad, Kiwadi, Daniyalpur, Mubarakpur in Barabanki district, UP | <ul style="list-style-type: none">• Bagsuma and Ratanpura villages in Dhanbad district of Jharkhand• Izarhatta, Benipur, Darbhanga, Bihar• Bazpatti, Sitamarhi, Bihar• Village TEMRI Near FUNDAHAR Raipur Chattisgarh• Village Gharbara, Mizoram |
|---|--|

RSSDI Kerala State Annual Conference 2026

The RSSDI Kerala State Annual Conference 2026, hosted by the Kerala Chapter, concluded on a highly successful note at Hotel Gokulam Grand, Kozhikode, on 28th–29th March 2026. With an impressive participation of nearly 850 delegates, the conference emerged as a vibrant academic gathering, reflecting the growing enthusiasm of India's medical fraternity toward advancing diabetes and metabolic care.

The inaugural ceremony was led by Chief Guest Dr. K.G. Sajeeth Kumar, who highlighted the urgent need for collaborative strategies in addressing the escalating burden of diabetes. Guest of Honour Dr. Chandni R. reinforced the significance of early diagnosis and patient-centered care. National RSSDI leadership, including Dr. Anuj Maheshwari (National President), Dr. Sunil Gupta (President Elect), Dr. Rakesh Parikh (National Secretary), along with National EC members Dr. G. Vijayakumar and Dr. Jothidev Kesavadev, enriched the conference with their valuable insights.

Over two academically stimulating days, the conference featured scientific sessions, workshops, and expert-led panel discussions on contemporary themes such as artificial intelligence in diabetology, obesity management with emerging pharmacotherapies including GLP-1 receptor agonists, insulin pump advancements, diabetes complications, and precision medicine.

Special highlights included the Obesity Symposium, Insulin Pump Workshop, postgraduate quiz, and paper presentations, fostering engagement among young clinicians and researchers.

Under the capable leadership of Organising Chairman Dr. P. Suresh Kumar, Organising Secretary Dr. K.P. Rajesh, Organising Treasurer Dr. Rojith Balakrishnan, Scientific Chairperson Dr. Anita Nambiar, and State Secretary Dr. Joe George, the conference set a remarkable benchmark for scientific excellence and professional collaboration in diabetes care.



RSSDI Gujarat State Annual Conference - DIABETICA 2026

DIABETICA 2026, the prestigious annual conference of the Gujarat Chapter of RSSDI, concluded successfully on 4th–5th April 2026 at Regency Lagoon Resort, Rajkot, delivering an exceptional academic experience for over 650 delegates from Gujarat and across India. The conference stood out as a vibrant confluence of knowledge, innovation, and collaboration in the field of diabetology.

Under the dynamic leadership of Organizing Chairman Dr. Pratap Jethwani, Scientific Chairman Dr. Piyush Desai, and Organizing Secretary Dr. Bhumi Dave, supported by Patron Dr. Banshi Saboo, the RSSDI Gujarat Executive Committee, and the Association of Physicians of Rajkot, DIABETICA 2026 was meticulously curated to uphold the highest scientific standards.

The two-day conference featured an impressive faculty lineup of over 80 distinguished national experts who delivered highly relevant sessions on contemporary topics including artificial intelligence in diabetes management, continuous glucose monitoring (CGM), insulin pump technologies, cardiometabolic risk reduction, and evolving therapeutic strategies. Practical workshops, engaging panel discussions, and evidence-based deliberations ensured a rich learning environment for practicing clinicians.

A notable highlight was the enthusiastic participation of young researchers through 15 free paper presentations and over 30 e-poster presentations, showcasing emerging ideas and clinical innovations.

Prestigious orations, vibrant scientific exchanges, and meaningful networking opportunities further enhanced the conference atmosphere. DIABETICA 2026 reaffirmed Gujarat's growing leadership in diabetology education and successfully strengthened its mission of promoting evidence-based, future-ready diabetes care for clinicians and patients alike.



Inaugural function at Diabetica 2026



Dr. Anuj Maheshwari, President RSSDI being felicitated at Diabetica 2026 in Rajkot

RSSDI Telangana State Annual Conference 2026

The TGRSSDI Annual Conference 2026, hosted by the Telangana Chapter of RSSDI on 11th–12th April 2026 at the scenic Vijay Vihar, Nagarjunasagar, concluded as a memorable blend of academic excellence and meaningful clinical reflection. With nearly 780 delegates in attendance, the conference stood out not only for its scientific depth but also for its powerful focus on equitable diabetes care.

Centered around the theme, “Diabetes Management in Rural India – The Science and an Art with Empathy,” the conference highlighted the pressing need to combine modern diabetology with compassionate, practical solutions for underserved populations. This unique theme resonated strongly throughout the scientific sessions, workshops, and panel discussions.

Under the leadership of Dr. Udai Lal (Chairman), Dr. DC Thirupathi Rao (Scientific Chair), Dr. Riyaz Mohammed (Secretary), and Dr. Srirang Akbari (Treasurer), alongside Organizing Chairman Dr. Mathru and Organizing Secretary Dr. Srinivas, the event was executed with remarkable precision.

National RSSDI leaders including Dr. Anuj Maheshwari (President) and Dr. Sunil Gupta (President-Elect), along with esteemed faculty from across India, enriched the program with contemporary discussions on diabetes technologies, rural healthcare delivery, and future-focused management strategies.

A major highlight was the launch of the TGRSSDI School Project, aimed at grassroots diabetes awareness, alongside postgraduate workshops engaging 150 young clinicians.

TGRSSDI 2026 successfully reinforced that diabetes care in India must extend beyond science alone—embracing empathy, innovation, and accessibility for every community.



Dr. Anuj Maheshwari, President RSSDI inaugurated the Metabolic health assessment program for school children

Activities Report : RSSDI Tamil Nadu Chapter

ACTIVITY:1

Dr.Bhavatharini, Secretary, Tamilnadu RSSDI, conducting World Health Day at SRC Diabetes Care Center and also gave an awareness talk to the public on the importance of Health & Early Screening of Diabetes. Beneficiaries: 75



ACTIVITY:2

Dr. Bhavatharini, Secretary, Tamilnadu RSSDI, conducting Women's Day Celebration and Health Awareness talk for College students. Beneficiaries:400



Activities Report : RSSDI Tamil Nadu Chapter

ACTIVITY:3

Dr. Ravindranath, President Elect, Tamilnadu RSSDI Conducted a Free Diabetes Wellness Camp for SBI Employees and Pensioners, Trichy under the Tamilnadu RSSDI Banner. FREE Height, Weight, BMI, Blood Pressure, Blood Sugar, PFT was done for all beneficiaries. Beneficiaries: 165



ACTIVITY:4

Dr. Aarathy Kannan, District Coordinator & EC Member of Tamilnadu RSSDI, gave an awareness talk on Women's Health and Psychological Health at Ladies Recreation Club, Tuticorin. Beneficiaries: 125



Activities Report : RSSDI Tamil Nadu Chapter

ACTIVITY:5

Dr. Aarathy Kannan, District Coordinator & EC Member of Tamilnadu RSSDI, Conducted the Free Medical Camp for the New Pasakarangal Educational and Charitable trust Old Age Home, Tuticorin. FREE Height, Weight, BMI, Blood Pressure, Blood Sugar, Medicines was done for all beneficiaries. Beneficiaries: 200



ACTIVITY:6

Dr. C.Muralidharan, Member of Tamilnadu RSSDI, Conducted the Free Medical Camp for the Public, Dindigul. FREE Investigations Random Blood Sugar, Blood Pressure, Height, Weight, BMI, Urine for microalbumin, Biothesiometry, Podiascan, Bone Mineral Density – DEXA Scan, Diet Counseling was done for all beneficiaries. Beneficiaries: 150



Activities Report : RSSDI Tamil Nadu Chapter

ACTIVITY:7

Dr. C.Muralidharan, Member of Tamilnadu RSSDI, Conducted the Free Medical Camp for the Public, Dindigul. FREE Investigations Random Blood Sugar, Blood Pressure, Height, Weight, BMI, Urine for microalbumin, Biothesiometry, Fibroscan, Diet Counseling and Doctor's Consultation was done for all beneficiaries. Beneficiaries: 282



ACTIVITY:8

Dr. D.Gowri Shankar, Member of Tamilnadu RSSDI, gave an Diabetes and Liver Health awareness talk for patients at R.D.Dharmaraj Diabetic and General Hospital, Bodinayakanur, Theni District. Beneficiaries: 75



Activities Report : RSSDI Tamil Nadu Chapter

ACTIVITY:9

Dr. D.Gowri Shankar, Member of Tamilnadu RSSDI, the occasion of World Liver Day gave a Diabetes and Fatty Liver Awareness talk and Free FIB 4 Score done for patients at R.D.Dharmaraj Diabetic and General Hospital, Bodinayakanur, Theni District. Beneficiaries: 60



SOLAPUR, MAHARASHTRA

Obesity Symposium & Patient Education Program | Date : 25th–26th April, 2026

An Obesity Symposium and Patient Education Program were successfully conducted in Solapur, Maharashtra, India, focusing on advancing clinical knowledge among healthcare professionals and spreading awareness on obesity management among patients.

Program Highlights:

1. Speakers: Dr. Panikar, Dr. Negalur, Dr. Nikhil Nasikkar, Dr. Sanhita Walawalkar, Dr. Santosh Mote, Dr. Sachin Muley, Dr. Rahul Medidar
2. 81 doctors attended the Obesity Symposium (25th April)
3. 67 patients participated in the Patient Education Program (26th April)
4. Interactive expert-led sessions with comprehensive query resolution

Key Topics Covered:

1. Contemporary approaches in obesity management
2. Lifestyle modification and preventive healthcare
3. Patient awareness on treatment options and long-term care

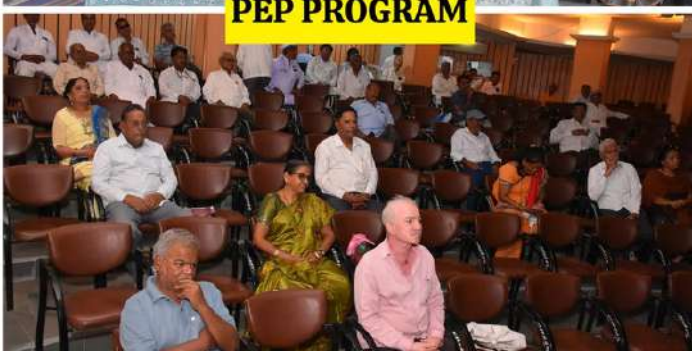
The initiative reinforced the importance of scientific exchange, patient education, early intervention, and sustainable lifestyle changes for effective obesity management.



PEP PROGRAM



CME PROGRAM



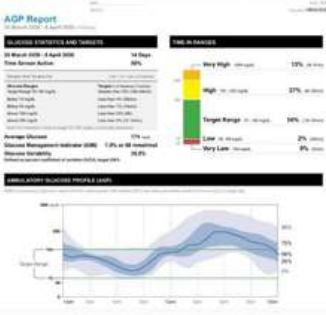


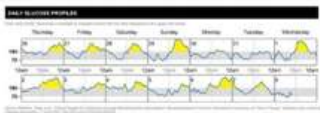
RSSDI CGM CLINICS

Episode 8

68Y/F DM SINCE 7 YEARS, ON OHAS SHOWING HIGH GV

9TH APRIL 2026
08:30 PM IST





What is your interpretation about the AGP and possible causes for GV ? Let's understand this particular case better and discuss possible solutions. **Please submit your comments under "Submit Your Response" tab of 8th Episode**

RSSDI CGM CLINICS: Episode 8: 68Y/F DM since 7 years, on OHAs showing high GV

What is your interpretation about the AGP and possible causes for GV ? Let's understand this particular case better and discuss possible solutions. Please submit your comments in a paragraph under 100 words in the "Submit Your Response" tab. Join us for the RSSDI CGM CLINICS: Episode 8: 68Y/F DM since 7 years, on OHAs showing high GV starting 08:30 PM Thursday 9th April 2026.

[Submit Your Response](#)

Expert



Dr. Abhijit Bhograj
Consultant Endocrinologist
AI Health Clinic & Manipal Hospitals Hebbal, Bengaluru

Expert



Dr. Nanditha
Consultant Diabetologist
Dr. A. Ramachandran's Diabetes Hospitals, Chennai

Presenter



Dr. Shruti Gangwani
Diabetologist and Faculty Member, Department of General Medicine, Dr. DY Patil School of Medicine, Navi Mumbai

Moderator



Dr. Manoj Chawla
Consultant Diabetologist & National RSSDI EC Member

[CLICK TO LOGIN OR REGISTER, WATCH AND SUBMIT YOUR RESPONSE](#)

Or Visit: <https://lms.rssdi.in/rssdilmsv1/>

Note: If you've registered for the previous episode, there's no need to register again. Simply log in to the RSSDI LMS portal from the above link and submit your response for Episode 8 and watch the session.

Dr. Anuj Maheshwari
President, RSSDI

Dr. Sunil Gupta
President Elect, RSSDI

Dr. Rakesh Parikh
Secretary General, RSSDI

Dr. Manoj Chawla
Coordinator, RSSDI CGM Clinics



Episode - 35

RSSDI CASE FILES

TYPE-2 DIABETIC WITH FEVER AND BREATHLESSNESS AND BEYOND

Join us on 23rd April 2026 | 08:30 PM IST



Case Presenter

Dr. S. S. Lakshmanan
Managing Director: Priya Nursing Home, Chennai

Panelist



Dr. Rohini Rokkam
Associate Professor
AIIMS, Raipur

Panelist



Dr. Hitesh Saraogi
Metabolic Physician and Diabetologist, Dhanvantari Hospital, Ghaziabad, UP

Panelist



Dr. Praveen Gangadhara
Consultant at Dr. Mohan's Diabetes Specialities Centre, Malleshwaram, Bengaluru.

Date & Time

23 APRIL 2026

8:30 PM - 9:30 PM IST

RSSDI Case Files Convener




Dr. Pratap Jethwani Dr. N. K. Singh

[Click here to register for the Webinar](#)

Dr. Anuj Maheshwari
President, RSSDI

Dr. Rakesh Parikh
Secretary General, RSSDI

Dr. Sunil Gupta
President Elect, RSSDI

Dr. Vijay Viswanathan
Immediate Past President, RSSDI

Dr. Banshi Sahoo
RSSDI Case Files Advisor

Dr. Pratap Jethwani
Hon Treasurer & RSSDI Case Files Convener

Dr. N. K. Singh
Vice President & RSSDI Case Files Convener

RSSDI CGM Clinics – Episode 8

RSSDI Case Files – Episode 35

During February, RSSDI conducted CGM Clinics Episode 8 on 09th April, focusing on the topic **"68Y/F DM since 7 years, on OHAs showing high GV"**. The session was presented by Dr Shruti Gangwani and featured an expert panel comprising Dr Abhijit Bhograj and Dr Nanditha , with Dr Manoj Chawla as the moderator. The episode generated meaningful discussions and provided practical CGM-guided remission strategies.

RSSDI also hosted Case Files Episode 35 on 23rd April, titled **"Type-2 Diabetic with fever and breathlessness and beyond"** The case was presented by Dr S. S. Lakshmanan, with expert insights from Dr Rohini Rokkam, Dr Hitesh Saraogi and Dr Praveen Gangadhara, under the convenership of Dr. Pratap Jethwani and Dr. N. K. Singh.

RSSDI Walk the Talk - Episode 4

This month, RSSDI conducted its 4th Episode of "RSSDI Walk the Talk" series featuring **Dr Neeta Deshpande**, Diabetologist and Bariatric Physician, Belgaum Diabetes Centre and CentraCare Institute of Diabetes, Obesity and Metabolic Health (CIDOM) with moderator **Dr Purvi Chawla**



RSSDI Diabetes Bytes 2.0

WALK THE TALK FROM RSSDI

Episode - 4



Dr Anuj Maheshwari
President, RSSDI



Dr Sunil Gupta
President Elect, RSSDI



Dr Rakesh Parikh
Secretary General, RSSDI



Dr Vijay Viswanathan
Imm. Past President, RSSDI



Dr. Neeta Deshpande
Diabetologist and Bariatric Physician
Belgaum Diabetes Centre and
CentraCare Institute of Diabetes,
Obesity and Metabolic Health (CIDOM)



Dr. Purvi Chawla
Consultant Diabetologist &
Convenor, RSSDI Diabetes Bytes 2.0

**CLICK HERE TO WATCH THE PODCAST
OR SCAN THE QR CODE**

Warm Regards

Dr. Anuj Maheshwari
President, RSSDI

Dr. Sunil Gupta
President-Elect, RSSDI

Dr. Rakesh Parikh
Secretary General, RSSDI

Dr. Vijay Viswanathan
Imm Past President, RSSDI

Dr. Purvi Chawla
Convenor, RSSDI Diabetes Bytes 2.0

RSSDI Walk the Talk - Episode 5

This month, RSSDI conducted its 5th Episode of "RSSDI Walk the Talk" series featuring **Dr Vimal Pahuja**, Associate Director, Dept of Medicine And Metabolic Health Expert (Obesity and Diabetes), Dept of Metabolic Health and Obesity Sciences, Dr L H Hiranandani Hospital, Mumbai with moderator **Dr Purvi Chawla**



RSSDI Diabetes Bytes 2.0

WALK THE TALK FROM RSSDI

Episode - 5



Dr Anuj Maheshwari
President, RSSDI



Dr Sunil Gupta
President Elect, RSSDI



Dr Rakesh Parikh
Secretary General, RSSDI



Dr Vijay Viswanathan
Imm. Past President, RSSDI



Dr Vimal Pahuja, MD

Associate Director Dept of Medicine
And Metabolic Health Expert (Obesity and Diabetes)
Dept of Metabolic Health and Obesity Sciences
Dr L H Hiranandani Hospital, Mumbai



Dr. Purvi Chawla

Consultant Diabetologist &
Convenor, RSSDI Diabetes Bytes 2.0

**CLICK HERE TO WATCH THE PODCAST
OR SCAN THE QR CODE**

Warm Regards

Dr. Anuj Maheshwari
President, RSSDI

Dr. Sunil Gupta
President-Elect, RSSDI

Dr. Rakesh Parikh
Secretary General, RSSDI

Dr. Vijay Viswanathan
Imm Past President, RSSDI

Dr. Purvi Chawla
Convenor, RSSDI Diabetes Bytes 2.0

Quiz

Evidence-based lipid management decision in high-risk diabetes, CKD, and ASCVD using updated ADA guidelines recommendations.

Q1. A 46-year-old man is reviewed in the diabetes clinic. He was diagnosed with presumed type 2 diabetes 2 years ago after presenting with thirst, polyuria and 7 kg weight loss. His BMI is 23 kg/m². He has no acanthosis nigricans. Despite metformin and gliclazide, his HbA1c remains 10.0%. Empagliflozin was added 3 months ago. He was recently admitted with abdominal pain and vomiting. Capillary glucose was 249 mg/dL, blood ketones 5.2 mmol/L, bicarbonate 14 mmol/L and pH 7.25. After recovery, his fasting C-peptide is 0.3 ng/mL with paired plasma glucose 182 mg/dL. GAD antibodies are positive. What is the most appropriate long-term management?

- a** Continue empagliflozin and add once-weekly semaglutide
- b** Stop gliclazide and empagliflozin, and commence basal-bolus insulin
- c** Continue metformin and add pioglitazone
- d** Restart empagliflozin at a lower dose with ketone monitoring
- e** Treat as ketosis-prone type 2 diabetes and withdraw insulin after 3 months

Q2. A 69-year-old woman is newly diagnosed with type 2 diabetes. She has obesity, previous myocardial infarction, heart failure with preserved ejection fraction, CKD stage 3b and albuminuria. Her eGFR is 38 mL/min/1.73 m² and urine albumin-creatinine ratio is 680 mg/g. HbA1c is 10.6%, fasting glucose 285 mg/dL and random glucose 331 mg/dL. She has osmotic symptoms but no ketones.

Which is the most appropriate initial glucose-lowering strategy?

- a** Metformin monotherapy and review HbA1c in 3 months
- b** Gliclazide and metformin because rapid glycaemic lowering is required
- c** Basal insulin with an SGLT2 inhibitor, with later addition of a GLP-1 receptor agonist or dual GIP/GLP-1 receptor agonist if tolerated
- d** Pioglitazone monotherapy because it improves insulin resistance and MASLD
- e** GLP-1 receptor agonist monotherapy because insulin should be avoided in heart failure

Prepared by :

Dr. Shambo Samajdar



Please find the answers and explanations at the end of this newsletter.



RSSDI Charitable & Community Outreach Activities led by RSSDI Members



FREE CAMP

Date : 13 April 2026

Diabetes with UROFLOW camp



DHENKANAL, ODISHA

Type : Rural Outreach/Village adoption |
Date : 21 April 2026

This month, on behalf of RSSDI, my team and I conducted a rural outreach programme in which we screened over 100 individuals aged above 60 years. We provided education on diabetes, sarcopenia, fall prevention, and age-related dementia. Additionally, we offered counselling on social isolation and distributed umbrellas to support protection during the summer season.





ANNUAL CONFERENCE OF THE RESEARCH SOCIETY
FOR THE STUDY OF DIABETES IN INDIA (RSSDI)

Venue:
Clarks Exotica, Bengaluru

Call for Abstract Submission

Last Date: 30th June 2026

We are delighted to invite you to submit your abstract for the **54th Annual Conference of RSSDI 2026**, scheduled to be held in Bangalore, Karnataka, from **19th to 22nd November 2026** at Clarks Exotica Bengaluru.

[Click here to submit your abstract](#)

Or Scan the QR code
or visit the link below directly

www.rssdi.in/abstract2026/



Dr. Anuj Maheshwari
President
National RSSDI



Dr. Sunil Gupta
Scientific Chair, RSSDI 2026
National President Elect, RSSDI



Dr. Rakesh Parikh
Secretary General
National RSSDI



Dr. K M Prasanna Kumar
Org. Chairperson
RSSDI 2026



Dr. L Sreenivasa Murthy
Org. Secretary
RSSDI 2026

Congratulations



Dr Amol Hartalkar
Pune, Maharashtra



Dr Krishnendu Roy
Kolkata, WB



Dr Khizer Hussain Junaidy
Hyderabad, Telangana



Dr Anbuchelvan T
Kanchipuram, TN



Dr Anchin Kalia
Jaipur, Rajasthan



Dr Palanikumar V
Madurai, TN



Dr Ashutosh Chaturvedi
Jaipur, Rajasthan



Dr Sanjeev Gulati
Bhopal, MP



Dr Firdous Shaikh
Mumbai, Maharashtra



Dr. Anubha Srivastava
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Thank you!

To all our esteemed members for your valuable contribution and for validating the highest numbers in the

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Dr. Rutul Goklani
Coordinator, Member Connect Program

Quiz Answer Key

Q1. A 46-year-old man is reviewed in the diabetes clinic. He was diagnosed with presumed type 2 diabetes 2 years ago after presenting with thirst, polyuria and 7 kg weight loss. His BMI is 23 kg/m². He has no acanthosis nigricans. Despite metformin and gliclazide, his HbA1c remains 10.0%. Empagliflozin was added 3 months ago. He was recently admitted with abdominal pain and vomiting. Capillary glucose was 249 mg/dL, blood ketones 5.2 mmol/L, bicarbonate 14 mmol/L and pH 7.25.

After recovery, his fasting C-peptide is 0.3 ng/mL with paired plasma glucose 182 mg/dL. GAD antibodies are positive.

What is the most appropriate long-term management?

- A. Continue empagliflozin and add once-weekly semaglutide
- B. Stop gliclazide and empagliflozin, and commence basal-bolus insulin
- C. Continue metformin and add pioglitazone
- D. Restart empagliflozin at a lower dose with ketone monitoring
- E. Treat as ketosis-prone type 2 diabetes and withdraw insulin after 3 months

Correct Answer: B

Rationale: This patient has autoimmune diabetes presenting in adulthood, consistent with LADA/adult-onset type 1 diabetes rather than type 2 diabetes. The important clues are weight loss at diagnosis, lean phenotype, poor response to oral therapy, ketoacidosis after SGLT2 inhibitor exposure, low C-peptide and positive GAD antibodies. The AACE 2026 algorithm emphasises that type 2 diabetes should not be assumed solely because diabetes presents in adulthood. Once autoimmune insulin-deficient diabetes is established, insulin is required. SGLT2 inhibitors should be avoided because of ketoacidosis risk, particularly when endogenous insulin reserve is low. Sulfonylureas are also not preferred in LADA because of concern regarding β -cell deterioration.

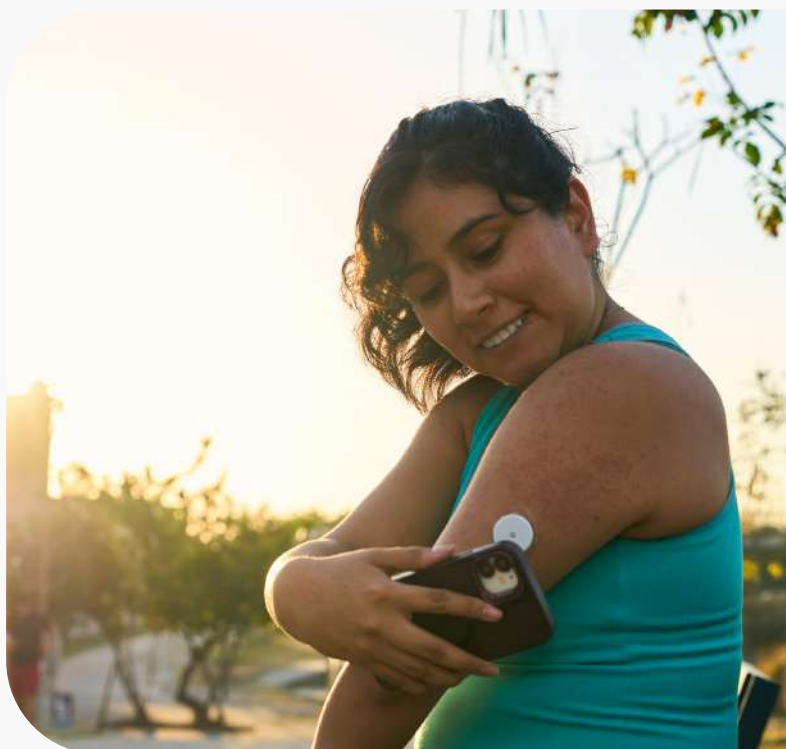
Q2. A 69-year-old woman is newly diagnosed with type 2 diabetes. She has obesity, previous myocardial infarction, heart failure with preserved ejection fraction, CKD stage 3b and albuminuria. Her eGFR is 38 mL/min/1.73 m² and urine albumin-creatinine ratio is 680 mg/g. HbA1c is 10.6%, fasting glucose 285 mg/dL and random glucose 331 mg/dL. She has osmotic symptoms but no ketones.

Which is the most appropriate initial glucose-lowering strategy?

- A. Metformin monotherapy and review HbA1c in 3 months
- B. Gliclazide and metformin because rapid glycaemic lowering is required
- C. Basal insulin with an SGLT2 inhibitor, with later addition of a GLP-1 receptor agonist or dual GIP/GLP-1 receptor agonist if tolerated
- D. Pioglitazone monotherapy because it improves insulin resistance and MASLD
- E. GLP-1 receptor agonist monotherapy because insulin should be avoided in heart failure

Correct Answer: C

Rationale: This patient has marked symptomatic hyperglycaemia with HbA1c >10% and glucose >300 mg/dL, so insulin is appropriate initially to reverse glucotoxicity and control symptoms. However, treatment should not be glucose-centric alone. The AACE 2026 approach prioritises comorbidities and complications when selecting therapy. In a patient with heart failure and albuminuric CKD, an SGLT2 inhibitor with proven cardiorenal benefit is a key early therapy, provided there is no contraindication. Given established ASCVD and obesity, a GLP-1 receptor agonist or dual GIP/GLP-1 receptor agonist with proven benefit should be added or planned once clinically feasible. Metformin may be used if tolerated and renal function permits, but it is not sufficient as sole initial therapy in this case.



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