May 2026 | Newsletter Vol. 48 | Issue 5

RSSDI NEWS

THE OFFICIAL BULLETIN OF RSSDI

MESSAGE FROM THE RSSDI PRESIDENT

Dr. Anuj Maheshwari

President's Message: RSSDI Consensus Recommendations & Their Impact

Dear Colleagues,

The RSSDI Consensus Group is working tirelessly to finalize the **2026 Diabetes Management Recommendations**. Over the last four years, we have witnessed significant advancements in available therapeutic options, their management hierarchy, and technological integration.
As we reflect on the first edition of the RSSDI recommendations released in 2015, we must introspect: **Why hasn't this guidance deeply impacted the care delivered by general practitioners and primary healthcare workers?**
Prescription trends remain largely unchanged. We strongly believe that if diabetes care is fortified at the primary care level, we can sizably reduce complication rates and alleviate the immense burden on tertiary care facilities.

Addressing Ground Realities in India

India faces a unique challenge, with the prediabetic population outnumbering those with diagnosed diabetes by 1.5 times. These are individuals we can save, or whose progression to Type 2 Diabetes Mellitus (T2DM) can be significantly delayed. We must deploy robust strategies to achieve this.
While some experts view the US-FDA as more reliable or evidence-based, we practice in India, where the DCGI is our regulatory authority. Our clinicians actively look to us for evidence-based guidance on drugs approved by the **DCGI** for Indian clinical practice.
Our purpose should not be to rewrite Western guidelines with an Indian pen. Our consensus recommendations must address the ground realities and systemic intricacies faced by clinicians across India. Western frameworks leave a massive gap when applied to Indian nutritional and dietary needs. We cannot accurately address our challenges through a Western lens.
In our 2026 recommendations, we must tackle issues of nutritional deprivation alongside pharmacological weight loss. Furthermore, we must address **sarcopenia and postprandial hyperglycemia** in a population that is largely vegetarian with carbohydrate-predominant diets. Modifying eating habits is no simple task, and I believe that this year, we will deliver truly indigenous solutions.

Upcoming Initiatives & Collaborations

- **Position Statement on Prediabetes & T2DM:** We are soon releasing a position statement that directly reflects our regional, indigenous requirements.
- **Joint Consensus on GDM:** In due course, joint consensus recommendations for Hyperglycemia in Pregnancy and GDM will be introduced in association with the **Indian College of Obstetricians & Gynaecologists (ICOG)**. This initiative will effectively bridge the clinical gap between obstetricians and physicians.

Expanding Our Footprint

The enthusiasm for the **Rural Outreach Program (RROP)** is highly welcome, but we need to accelerate our pace. To facilitate this, the national body now permits individual RSSDI members to drive these programs independently if they can manage the resources without state chapter assistance. Please note that while the national body officially supports initiatives through state chapters, the **Standard Operating Procedures (SOPs)** must remain identical across both individual-led and RSSDI-supported villages.
Additionally, RSSDI remains deeply committed to fostering localized research. I invite you all to submit your research projects via our **Online Research Grant Portal** and present your findings at our upcoming annual conference.

Defeating the Silent Killers

May 17th marked World Hypertension Day. Hypertension remains the most common comorbidity associated with diabetes, and we cannot successfully prevent diabetic complications without strictly managing blood pressure. Aligned with the official theme, "Controlling Hypertension Together," I urge you to regularly check your own blood pressure while managing these dual diseases for your patients. Let us work together to defeat these silent killers.

Together, we can truly make a difference.

With warm regards,

Prof. Anuj Maheshwari
MD, MACP

MESSAGE FROM THE RSSDI SECRETARY GENERAL
Dr. Rakesh Parikh

As we bring you another edition of our newsletter, I would like to extend my heartfelt appreciation to the editorial team for their dedication and hard work in consistently producing a publication that informs, educates, and connects our members across the country. The quality of content and the growing participation from various chapters are truly encouraging.

I would also like to sincerely thank all members and volunteers who participated in **Phase 1 of the RSSDI Member ReConnect Program**. Your enthusiastic support has helped us verify and update member information, strengthen our database, and reconnect with colleagues across the nation. This initiative has reinforced the spirit of belonging that has always been one of RSSDI's greatest strengths.

As part of our commitment to improving communication with members, RSSDI has now initiated **official bulk WhatsApp communication services.** This will enable us to share important announcements, academic opportunities, election-related information, deadlines, and organizational updates more efficiently and directly with our members. I encourage everyone to ensure that their contact details remain updated so that they can fully benefit from these communications.

I am also pleased to inform you that applications are now open for various **RSSDI Fellowships, Awards, and Orations**. These recognitions celebrate excellence in clinical practice, research, education, and service to the field of diabetology. Eligible members are encouraged to submit their applications through the online portal before the respective deadlines. I particularly urge our younger colleagues and emerging leaders to take advantage of these opportunities.

Finally, I invite all members to actively contribute to this newsletter. Whether it is a clinical insight, research update, chapter activity, opinion piece, or an innovative initiative from your region, your contributions enrich our collective learning and strengthen the voice of RSSDI.

Thank you for your continued support and participation in the growth of our society.

Warm regards,

Dr. Rakesh Parikh, Secretary- General, RSSDI

MESSAGE FROM THE
RSSDI Newsletter, Editorial Team

Dear RSSDI Members,

May 2026 has been a meaningful month for RSSDI, reminding us once again that diabetes care is much more than managing blood glucose. It is about protecting the heart, kidneys, eyes, feet, and overall quality of life of every person living with diabetes.

This month, as we observed **World Hypertension Day**, the message became especially relevant to our daily practice. Hypertension often travels silently with diabetes, increasing the risk of cardiovascular disease, stroke, kidney disease, and premature complications. As physicians and diabetes care professionals, we must continue to make blood pressure measurement, lifestyle advice, salt restriction, weight control, adherence, and regular follow-up an integral part of every consultation.

Another heartening highlight was the **Village Adoption Initiative in Gujarat**, where RSSDI's vision moved closer to the community. Such outreach programs bring screening, awareness, medical care, and hope to people who may otherwise remain undiagnosed or untreated.

It is also encouraging to see the continued momentum of **online academic and educational initiatives by the Maharashtra and Bihar State Chapters.** These digital programs have helped RSSDI reach doctors, educators, and healthcare teams beyond geographical boundaries, keeping the spirit of learning active and accessible.

I sincerely appreciate the efforts of all state chapters and members contributing through camps, webinars, academic activities, patient education, and community initiatives. Each effort becomes part of a larger national movement for better diabetes and metabolic health.

Let us continue to work together with commitment, compassion, and purpose — taking quality diabetes care from clinics and conferences to every community that needs us.

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 Dhandhania


Dr. Vipul Chavda

Dr Anil Kumar Virmani
National EC Member, RSSDI

Insider Info : Know Your EC Member

1. Your journey with diabetes care?

After My MD in Internal Medicine in 1984, I was in charge of the “Diabetic Clinic” at Tata Main Hospital, in Jamshedpur. That time we were treating patients based on urine sugar report only and in very few cases, we would get blood sugar done. Even at that time, I found Diabetes very challenging and felt that we were not doing proper justice to our patients. Fortunately, with time, management of diabetes evolved and it was fascinating to see the world of diabetes changing drastically before my eyes. Today, I’ve realized the multi-faceted aspects of this challenging disease and find every patient unique and requiring an individualized approach

2. What's your go-to hobby?

My wish is to always spend some quality time with my close friends and in “Party” mode, which I manage to do nowadays as almost every weekend I’m travelling for a conference and networking with my friends. However, on weekdays, I love to relax watching action and drama films on Netflix almost every day, as I’ve stopped attending emergencies and admitting patients.

3. Hidden talent?

Ha, Ha. I love acting and theatre, and debating on contemporary issues, and was once the Best Actor & Debater of Delhi University in 1970-1971. I’d also written and directed a play, based on the thriller “Psycho”, involving Senior officers of Tata Steel Raw Materials Division in 1979.

4. Professional Insights

1. Current role and passion project?

Since post-Covid, I've limited my practice to 15 patients per day, and what truly excites me today is reading new literature on my computer and preparing presentations on varied topics as allotted to me by the conference organizers. In fact, I've earned the reputation of being able to speak on any topic.

2. RSSDI's impact on your practice?

Though I've not been a stickler for various guidelines, but I do find our RSSDI Guidelines, the most comprehensive and the Best, so I tend to follow it almost strictly and teach the same. Even in my talks I always emphasize that we should all be following our own Indian guidelines instead of ADA or European

3. Achievement you're proud of?

Being Conferred with FRCP (LONDON) and then Edinburgh just after in 2024.

5. Vision for RSSDI

1. How can we improve diabetes care in India?

Community outreach programs and adopting villages for taking the best diabetes care to the most underserved areas. And, I'm proud to say that our President Dr. Anuj Maheshwari's dream project has been the same. I also firmly believe that we should Educate, Educate & Educate our patients, their family members and people of our society in general, about diabetes.

2. Your contribution to RSSDI's mission?

I'm fortunate to be in the second term (Fourth year) in the EC, and am actively involved in a number of committees and carrying out all the responsibilities given to me by the President & Secretary, to the best of my abilities.

3. Message for RSSDI members?

Don't treat Diabetes as any other disease. Develop a passion for understanding it, and a friend and guide for your patients with diabetes. Keep yourself updated and lead your patients to a better, stress free, long health life.

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

- **Thamaraipakam Village near Chennai**
- **Vakkampatti Village, Dindukal District**
- **Vallimalai village, Vellore**
- **Safedabad, Kiwadi, Daniyalpur, Mubarakpur in Barabanki district, UP**
- **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 Rural Outreach Program
RSSDI Gujarat State Chapter | 17th May 2026 | Sunday

RSSDI Odisha State Annual Conference 2026

The Mid-Term Conference of RSSDI Odisha was successfully organized on 24th May 2026 at the New Auditorium of MKCG Medical College and Hospital, Berhampur, Dist-Ganjam, Odisha, with enthusiastic participation of nearly 250 delegates, faculties, postgraduate students, and practicing physicians from across Odisha. The conference was conducted under the leadership of Chairman Dr. Sanjay Das, Secretary Dr. Suresh Kumar Bansal, Treasurer Dr. Satya Narayan Kar, Organising Chairman Dr. Pramod Kumar Pattnaik, and Organising Secretary Dr. Nihar Ranjan Sahoo.

The scientific conference focused on recent advances in diabetes care and metabolic disorders. Important academic deliberations were held on diabetes in young adults, diabetes in elderly patients, gestational diabetes, obesity and metabolic syndrome, intensive care management of diabetes, cardiovascular complications, diabetic kidney disease, and newer therapeutic strategies for comprehensive diabetes management.

The conference was graced by eminent physicians and academicians including Dr. Jayant Kumar Panda, Professor of Medicine, SCB Medical College, Dr. Bharat Panigrahy, Bhubaneswar, Dr. Dinabandhu Sahu, Bhawanipatna, Dr. Sudhanshu Pradhan, Dr. Satya Ranjan Sethy, Dr. Rupa Pradhan, Dr. Prasanna Ratha, Dr. Prasanna Kumar Padhy, Dr. Subas Mohapatra, Dr. P. Ravikumar, Dr. Debasis Patra, and Dr. Pradeep Kumar Padhy. The conference highlighted the growing burden of diabetes and obesity in India and emphasized the importance of early diagnosis, preventive healthcare, lifestyle modification, patient education, and evidence-based treatment strategies for improving long-term outcomes. The organizing committee expressed sincere gratitude to all delegates, speakers, and participants for making the academic event a grand success in Berhampur, District Ganjam.

Free Health Screening Camp Marks Maharashtra Day 2026

On the occasion of Maharashtra Day 2026 a Free Diabetes, Blood Pressure, and ECG Screening Camp was successfully organized under the auspices of the RSSDI Maharashtra Chapter.The camp was held on 1st May 2026 from 11:00 AM to 1:00 PM at a Primary School in Dahisar Tarphe, Manor, Taluka Palghar, with the support of 12 dedicated volunteers.

The objective was to promote awareness of non-communicable diseases and encourage early detection of diabetes, hypertension, and cardiovascular disease. 131 community members were screened, and receiving personalized lifestyle advice.

Among participants, 44 individuals had a known history of hypertension,while 3 were newly detected with high BP. For diabetes, 23 reported a prior history and 2 new cases of hyperglycemia were identified. ECG examinations were performed for 25 participants to assess cardiac health.

The initiative strengthened preventive healthcare at the grassroots level by providing quality screening and emphasizing early diagnosis and timely management. The camp was led by
Dr Purvi Chawla, RSSDI EC Member from Maharashtra, and Dr Manoj Chawla, Joint Secretary, RSSDI, whose leadership brought science and service to the community.

1st Academic Webinar – Latest Lipid Guidelines 2026 | Date: 27th May, 2026

The **Maharashtra Chapter** of RSSDI marked an important academic milestone with the successful hosting of its **first academic webinar** on **27th May 2026**, centered around the latest updates in lipid management.

Program Highlights:

1. The webinar was inaugurated by **Dr. Purvi Chawla**, Convener of the event, who welcomed participants and introduced the academic vision behind the session.

2. **Dr. Vijay Negalur** delivered the keynote talk on **"Latest Lipid Guidelines 2026,"** presenting the newest recommendations in a simplified, practical, and clinically relevant manner.

3. The session focused on bridging the gap between updated scientific evidence and everyday patient care, making complex guidelines easier to apply in routine practice.

4. **Dr. Nikhil Nasikkar** moderated the webinar, ensuring an engaging and interactive flow throughout the session.

5. A distinguished expert panel including **Dr. Vijay Panikar, Dr. Santosh Malpani, Dr. Chandrashekhar Ashtekar, and Dr. Vijay Negalur** shared valuable perspectives during the discussion.

6. The audience actively participated with thoughtful questions, leading to practical and case-based discussions around lipid management.

Key Takeaways:

1. Latest updates from the **Lipid Guidelines 2026**
2. Practical approach to **dyslipidemia management** in clinical practice
3. Risk assessment and treatment strategies for better patient outcomes
4. Expert-led discussion with real-world clinical insights

The webinar concluded with clear, actionable take-home messages and was appreciated by all participants as a strong beginning to RSSDI Maharashtra Chapter's academic initiatives

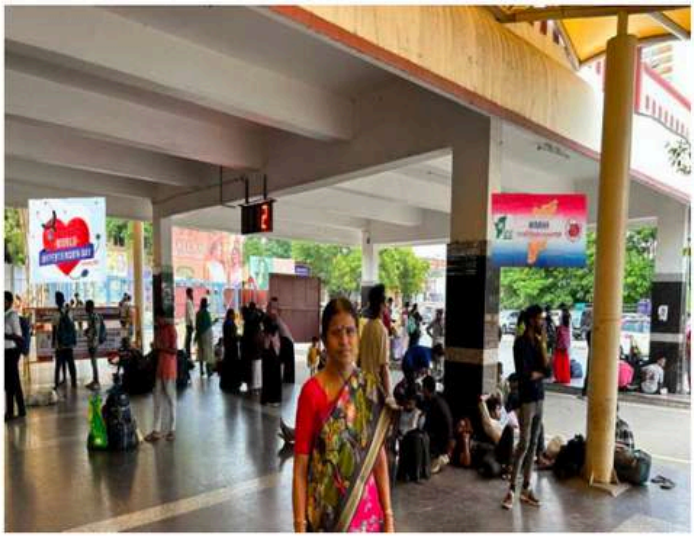
Activities Report :
RSSDI Tamil Nadu Chapter

ACTIVITY:1

Dr.Bhavatharini, Secretary, Tamilnadu RSSDI, Conducting International Nurses & Mid Wifey Day at Dhanvantri Nursing college and also gave an awareness talk to the Nursing Staffs and Students. Beneficiaries: 150

ACTIVITY:2

Dr. Bhavatharini, Secretary, Tamilnadu RSSDI, On occasion of World Hypertension Day gave an awareness talk for Staffs and Public at Railway Station, Erode. Beneficiaries: 250



Activities Report :
RSSDI Tamil Nadu Chapter

ACTIVITY:3

Dr.Aarathy Kannan, District Coordinator & EC Member of Tamilnadu RSSDI, on the occasion of World Hypertension Day 2026, conducted the Free Medical Camp and gave a Diabetes and Hypertension Awareness talk for the Public at Dr.Arul's Diabetes, Lifestyle and Research Centre, A unit of Sundaram Arulrhaj Hospitals, Tuticorin. FREE Height, Weight, BMI, Blood Pressure, Blood Sugar, Medicines, Diet Counseling and Doctor Consultation was done for all beneficiaries. Beneficiaries: 75

ACTIVITY:4

Dr.C.Muralidharan, Member of Tamilnadu RSSDI, on the occasion of World Hypertension Day 2026, conducted the Free Medical Camp and gave an Awareness talk for the Public at Vijaya Clinic Diabetes Care Centre, Dindigul. FREE Investigations Random Blood Sugar, Blood Pressure, Height, Weight, BMI, Biothesiometry, Fibroscan, Diet Counseling and Doctor's Consultation was done for all beneficiaries. Beneficiaries: 75

Activities Report :
RSSDI Tamil Nadu Chapter

ACTIVITY:5

Dr.C.Muralidharan, Member of Tamilnadu RSSDI, conducted the Free Public Diabetes Camp and gave an Awareness talk for the Public at Hotel Siva Grand, Palani Bypass, Dindigul. FREE Investigations Random Blood Sugar, Blood Pressure, Height, Weight, BMI, Biothesiometry, Bone Mineral Density (DEXA Scan), Diet Counseling and Doctor's Consultation was done for all beneficiaries. Beneficiaries: 95

Diabetes Awareness Talk for young mothers

A Diabetes and Health awareness talk and free checkup camp was organised by Dr Rajesh Kesari who's also a member of the national executive committee of RSSDI at Dev Samaj Modern School in New Delhi on 12th & 13th of May to mark the celebrations of international Mother's Day. Around 500 Young mothers enthusiastically attended the talk and asked questions to Dr Rajesh Kesari. The talk was focused on prevention of Diabetes and other metabolic diseases in the coming generations through appropriate lifestyle changes in the young children, Dr Kesari explained to the mothers the importance of avoiding excess weight gain in small children while focusing on the role of a Healthy Diet, increased physical activity and decreased screen time for the young ones. It was disturbing to note during a show of hands in an answer to Dr Kesari's question about friends and family members of the participants suffering from Diabetes- almost 90% of the young mothers raised there hands, this unfortunately reflects the reality of urban centres in our country today. Dr Kesari also talked about primordial prevention of Diabetes to the young mothers, explaining the importance of good nutrition and normal body weight to the c possibly would be mothers for prevention of Diabetes in their offspring's and the future generations.

All the participants of the event underwent free Blood Sugar and Vitals check up including Height Weight Blood Pressure and BMI and were given diet and lifestyle counselling by trained counsellor.

It is high time that we moved from management of Diabetes to Primordial prevention of Diabetes, RSSDI as an organisation has already taken up an important role in this mission we should all come together and support this initiative and conduct such awareness talks and camps in our vicinity.

RSSDI CGM Clinics – Episode 9
RSSDI Case Files – Episode 36

During February, RSSDI conducted CGM Clinics Episode 9 on 05th May, focusing on the topic **"CGM an important tool in Elderly DM with comorbidities"**. The session was presented by Dr V. Ashwin Karuppan and featured an expert panel comprising Dr Lala Leelarathna, Dr NK Singh and Dr Rishi Shukla, 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 36 on 21st May, titled **"When Glycemic Control Blisters"** The case was presented by Dr Chinmayee Anand Nityandila, with expert insights from Dr Suhas Gopal Erande, Dr Siddharth Gosavi and Dr Bharat Bhushan Kukreja, under the convenership of Dr Pratap Jethwani and Dr N. K. Singh.

Journal Watch 1

REIMAGINE 3 in 2 minutes

Rosenstock and colleagues report the phase 3 REIMAGINE 3 trial, published in The Lancet, evaluating once-weekly cagrilintide–semaglutide, or CagriSema, as an add-on to basal insulin in adults with inadequately controlled type 2 diabetes. This is an important study because many patients on basal insulin remain above glycaemic targets, yet further insulin intensification often causes weight gain, hypoglycaemia, and greater treatment burden.

In this double-blind, placebo-controlled trial, 274 adults with type 2 diabetes on stable once-daily basal insulin, with or without metformin, were randomised to CagriSema 2.4 mg/2.4 mg, CagriSema 1.0 mg/1.0 mg, or placebo for 40 weeks. The population had long-standing diabetes, with a mean duration of nearly 15 years, baseline HbA1c of 8.8%, BMI of 31.6 kg/m², and mean basal insulin dose of 34 units daily.

The results were clinically striking. HbA1c fell by 2.33% with the higher CagriSema dose and 2.10% with the lower dose, compared with 0.66% with placebo. By week 40, around 70–75% of CagriSema-treated participants reached HbA1c below 7%, compared with only 16% on placebo. This degree of glycaemic improvement is notable in patients already receiving basal insulin.

The weight findings are equally important. Instead of gaining weight, patients receiving CagriSema lost 10–12% of body weight, while the placebo group gained about 1%. More than half of CagriSema-treated participants achieved at least 10% weight loss. Basal insulin requirements also moved in the right direction: placebo-treated patients required dose escalation, whereas CagriSema avoided this increase, giving an estimated 20-unit daily insulin advantage versus placebo.

Safety was broadly consistent with GLP-1–based therapy. Gastrointestinal events were more common with CagriSema, especially nausea, diarrhoea, vomiting, constipation, and reduced appetite, mostly mild to moderate and during dose escalation. Importantly, no severe hypoglycaemia occurred, and clinically significant hypoglycaemia was not increased versus placebo.

The key limitation is that the comparator was placebo rather than active intensification with prandial insulin, fixed-ratio insulin/GLP-1 therapy, or another modern incretin-based strategy. Longer-term cardiovascular, renal, durability, and real-world data are still needed.

Take-home message: REIMAGINE 3 suggests that dual amylin and GLP-1 receptor agonism may offer a powerful insulin-sparing strategy for basal insulin-treated type 2 diabetes: large HbA1c reduction, clinically meaningful weight loss, less insulin escalation, and no excess severe hypoglycaemia.

Ref: Rosenstock J, Billings LK, Gajria R, Giorgino F, Johansen NB, Klein KR, et al. Cagrilintide–semaglutide (CagriSema) as an add-on to basal insulin in adults with type 2 diabetes (REIMAGINE 3): a randomised, double-blind, placebo-controlled, multicentre, phase 3 study. Lancet. 2026 Jun 7. doi:10.1016/S0140-6736(26)01022-6.

Journal Watch 2

REIMAGINE 2 in 2 minutes

Buse and colleagues report REIMAGINE 2, a large phase 3 trial published in The Lancet Diabetes & Endocrinology, comparing once-weekly cagrilintide–semaglutide, or CagriSema, with its individual components in people with type 2 diabetes and overweight or obesity. The clinical question is timely: even with modern GLP-1 therapy, many patients do not simultaneously achieve glycaemic and weight goals. This study asks whether adding an amylin receptor agonist to semaglutide can push outcomes beyond semaglutide alone.

The trial enrolled 2713 adults with type 2 diabetes inadequately controlled on metformin with or without an SGLT2 inhibitor. Mean baseline HbA1c was 8.2%, mean BMI about 35 kg/m², and mean diabetes duration about 8.5 years. Participants were randomised to CagriSema 2.4/2.4 mg, semaglutide 2.4 mg, cagrilintide 2.4 mg, CagriSema 1.0/1.0 mg, semaglutide 1.0 mg, or placebo for 68 weeks.

For the primary endpoint, CagriSema 2.4/2.4 mg reduced HbA1c more than semaglutide 2.4 mg: −1.91% versus −1.75%, with an estimated treatment difference of −0.16 percentage points. Statistically this was significant, though clinically the glycaemic margin over high-dose semaglutide was modest. The combination was clearly superior to cagrilintide alone and to semaglutide 1.0 mg. CagriSema 1.0/1.0 mg also outperformed semaglutide 1.0 mg.

The more striking differentiation was weight. At week 68, CagriSema 2.4/2.4 mg produced 14.2% weight loss, compared with 10.2% with semaglutide 2.4 mg and 8.4% with cagrilintide 2.4 mg. The lower-dose combination also outperformed semaglutide 1.0 mg, with 12.0% versus 7.5% weight loss. Importantly, more patients achieved clinically meaningful weight-loss thresholds: with high-dose CagriSema, 66% achieved ≥10% weight loss, 43% achieved ≥15%, and 24% achieved ≥20%, all higher than with semaglutide 2.4 mg.

Safety was broadly consistent with incretin-based and amylin-based therapy. Adverse events were common across active groups and were mainly gastrointestinal, including nausea, diarrhoea, vomiting, constipation, and appetite reduction. Serious adverse events were not highlighted as a major differentiating signal in the summary, but treatment discontinuation was more frequent with active therapy, largely because of gastrointestinal tolerability.

The key limitation is that the incremental HbA1c benefit over semaglutide 2.4 mg was statistically significant but small, so the main clinical value of CagriSema may lie in combined glycaemic control plus superior weight reduction. The trial was also industry funded, and longer-term cardiovascular, renal, durability, and real-world adherence data remain important.

Take-home message: REIMAGINE 2 supports CagriSema as a dual amylin–GLP-1 strategy that modestly improves HbA1c beyond high-dose semaglutide but more meaningfully improves weight outcomes. For patients with type 2 diabetes and obesity who need both glycaemic control and substantial weight reduction, CagriSema may represent the next step beyond GLP-1 monotherapy.

Ref: Buse JB, Bajaj HS, Dalskov SM, Donaldson L, Hansen Duus HH, Fabricius TW, et al. Cagrilintide–semaglutide (CagriSema) versus semaglutide or cagrilintide in people with type 2 diabetes (REIMAGINE 2): a double-blind, randomised, controlled, phase 3 study. Lancet Diabetes Endocrinol. 2026 Jun 7. doi:10.1016/S2213-8587(26)00125-7.

Quiz

A 40 year-old male, who presented with C/O Abdominal pain radiating to back since 3months, associated with steatorrhea, loss of weight and appetite. O/E, BP- 100/60mmHg, PR -86/min, CVS -S1S2 +, RS-NVBS+, PA –Soft, left upper abdomen mild tenderness +, CNS NFND.

Q1. What does the X-ray abdomen shows?

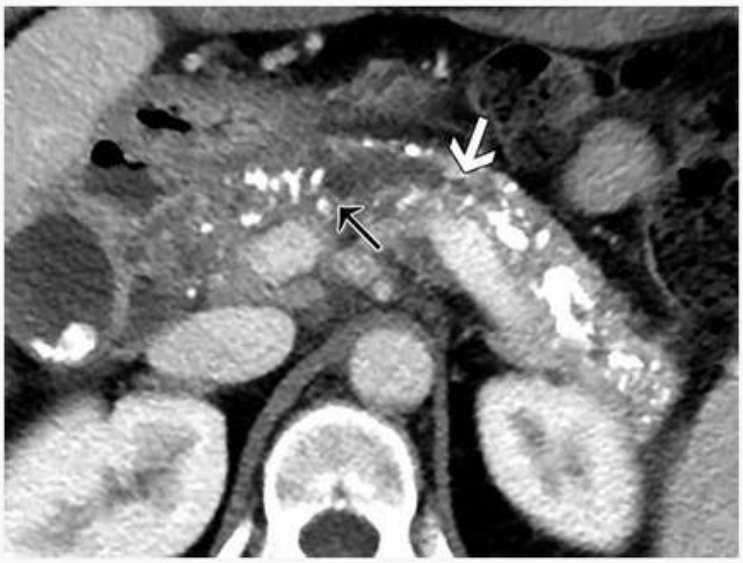
Calcifications in upper abdomen.
Chronic calcific pancreatitis.

Q2. What are the common causes?

Alcohol, Idiopathic **(tropical pancreatitis in India)**, Genetic (PRSS1, SPINK1 mutations), Autoimmune, Obstructive (ductal stricture, tumor).

Q3. What are the complications of CCP?

Pseudocyst, Biliary obstruction, Pancreatic ascites, Splenic vein thrombosis, Pancreatic cancer (important long-term risk).



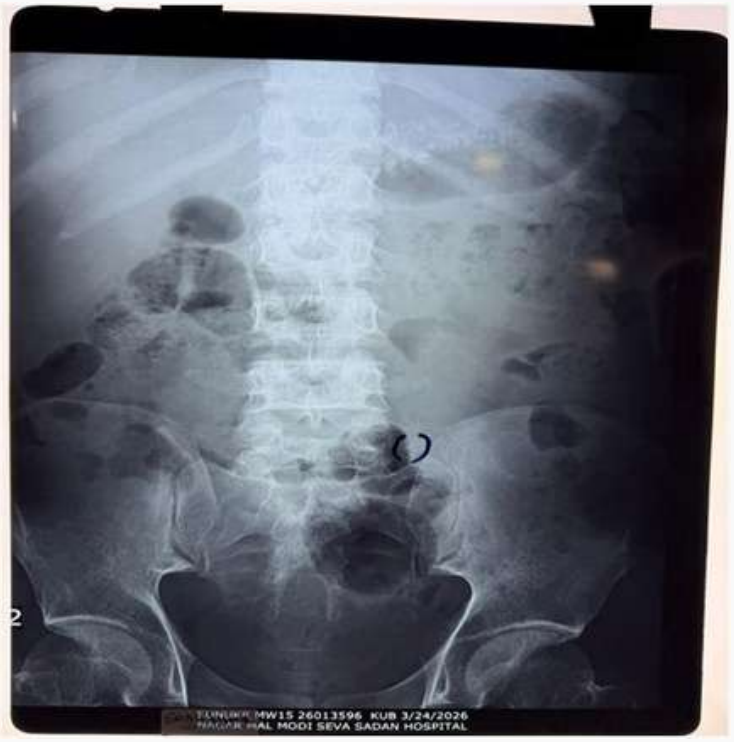
Q4. What is fibrocalculous pancreatic diabetes (FCPD)?

A form of diabetes seen in tropical pancreatitis characterized by:
Early onset, Lean patients requiring insulin therapy with low ketosis tendency.

Q5. What is the management of chronic calcific pancreatitis?

Medical: Alcohol abstinence, Analgesics, Pancreatic enzyme supplementation.
Endoscopic: Ductal stenting, Stone removal.
Surgical: Lateral pancreaticojejunostomy (Puestow procedure), Whipple (if malignancy suspected).

Prepared by :
Dr Aarathy Kannan



RSSDI Charitable & Community Outreach Activities led by RSSDI Members

PUBLIC AWARENESS

Date : 09 May 2026

Under the banner of RSSDI, a School Awareness Program was organized on 09 May 2026 at Middle School, Gurmi, Araria, Bihar. The session focused on awareness regarding Non-Communicable Diseases (NCDs) among adolescents, including diabetes, hypertension, obesity, mental health, addiction, healthy diet, and lifestyle practices.

The awareness session was conducted by Dr. Abhay Kumar, District Coordinator, RSSDI – Araria, Bihar. Students actively participated in the interactive session. A blood sugar screening camp and medicine distribution were also organized.

RSSDI plans to continue similar awareness activities regularly in schools across Araria district.

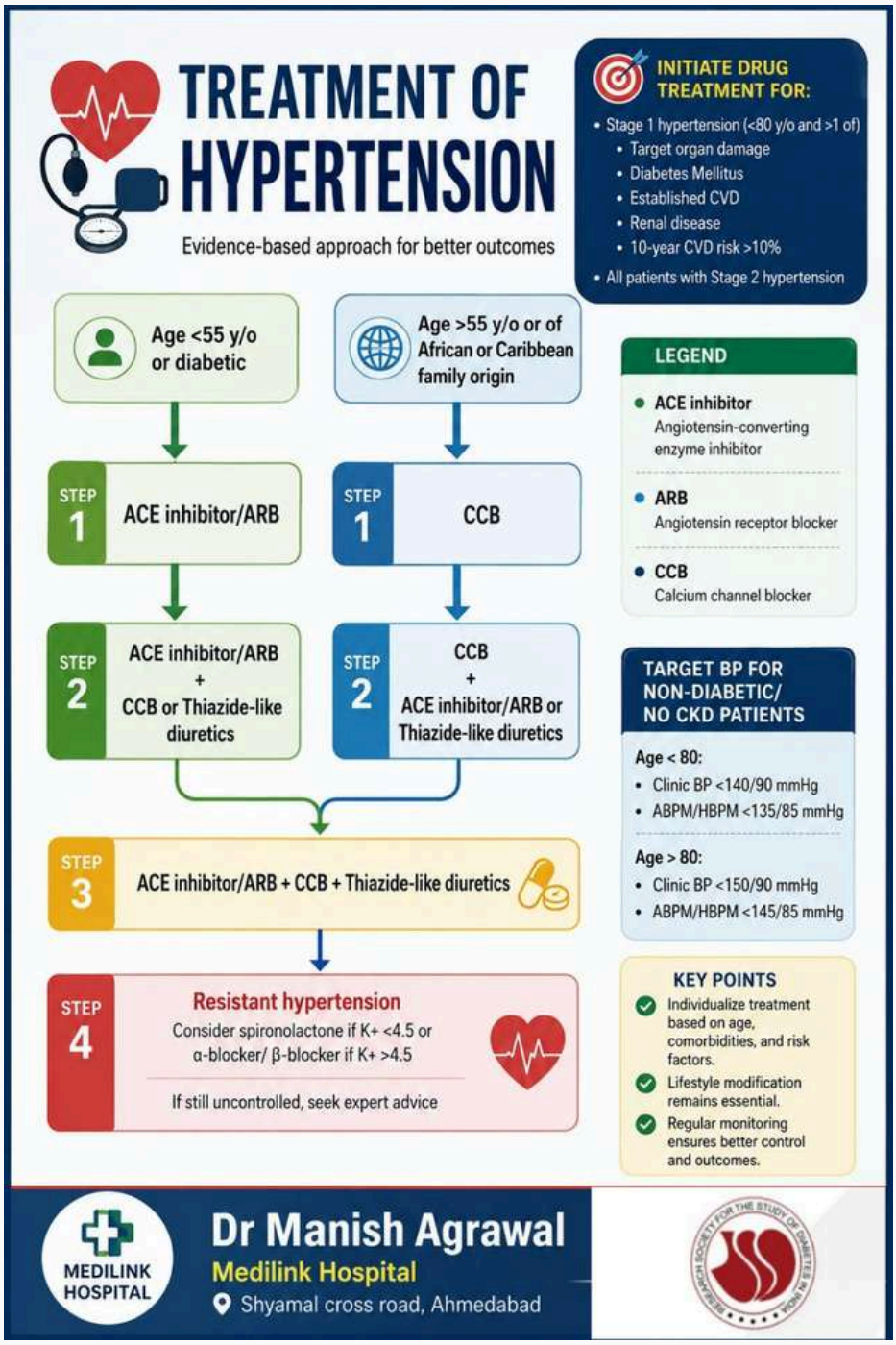
PUBLIC AWARENESS

Date : 16 May 2026

Hypertension needs the right treatment approach

From lifestyle changes to step-wise medication—early control can prevent serious complications.

Stay informed. Stay healthy.



FREE CAMP

Date : 17 May 2026

Free camp for kids with type 1 DM

54th RSSDI 2026

19-22 NOVEMBER Bengaluru

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

54th RSSDI 2026

19-22 NOVEMBER Bengaluru

Venue:
Aldovia Resort & Convention
(formerly Clarks Exotica)

CALL FOR ORATION

We are pleased to invite applications for Orations at the **54th Annual Conference of RSSDI 2026**, scheduled to be held in Bangalore, Karnataka, from **19th to 22nd November 2026** at Aldovia Resort & Convention (formerly Clarks Exotica).

Scan the QR code to apply for Orations

or visit the link below directly

www.rssdi.in/rssdi-orations/

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

RESEARCH SOCIETY FOR THE STUDY OF DIABETES IN INDIA

RESEARCH SOCIETY FOR THE STUDY OF DIABETES IN INDIA
RSSDI Karnataka Chapter

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CALL FOR FELLOWSHIP

We are pleased to invite applications for the **RSSDI Fellowships for the year 2026**. Eligible members are encouraged to submit their applications and supporting documents for consideration

Applications may be submitted through the official RSSDI Fellowship portal :

Scan the QR code to apply for fellowship

or visit the link below directly

www.rssdi.in/rssdi-fellowships/

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CALL FOR Awards

Applications are invited for the **RSSDI USV Best Innovation Award, RSSDI Emcure Woman Diabetologist Award, and RSSDI Novartis Young Investigator Award.** These prestigious awards recognize excellence in innovation, clinical practice, leadership, and research in the field of diabetology. Eligible members are encouraged to submit their applications through the RSSDI Awards portal.

Scan the QR code to apply for Awards

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Org. Secretary
RSSDI 2026

National Executive Committee 2026

Dr. Anuj Maheshwari
President

Dr. Vijay Viswanathan
Imm Past President

Dr. Sunil Gupta
President Elect

Dr. Rakesh Parikh
Secretary General

Dr. Pratap Jethwani
Hon. Treasurer

Dr. Aravinda J.
Vice President

Dr. N K Singh
Vice President

Dr. Manoj Chawla
Joint Secretary

Dr. Anil K Virmani
All India EC Member

Dr. Arvind Gupta
All India EC Member

Dr. Jothydev Kesavadev
All India EC Member

Dr. Narayan Deogaonkar
All India EC Member

Dr. Rajesh Kesari
All India EC Member

Dr. Vijaya Kumar G.
All India EC Member

Dr. Narsingh Verma
EC Member (Central)

Dr. B K Singh
EC Member (East)

Dr. Sanjay K Bhadada
EC Member (North)

Dr. Dinesh Agarwal
EC Member (North-East)

Dr. KN Manohar
EC Member (South)

Dr. Lotika Purohit
EC Member (West)

Dr. Amit Gupta
Co-Opted

Dr. Jayanta Panda
Co-Opted

Dr. Rutul Gokalani
Co-Opted

Dr. Sanjay Agarwal
Co-Opted

GET FEATURED IN THE RSSDI NEWSLETTER

Showcase Your Charitable & Community Outreach Activities

RSSDI invites its members to submit details of their charitable and community outreach initiatives carried out during the month of **June**, for feature in the June issue of the RSSDI Newsletter.

Submit details by scanning the QR code **OR**

Click Here

WARM REGARDS

Dr. Anuj Maheshwari	Dr. Sunil Gupta	Dr. Rakesh Parikh	Dr. Vijay Viswanathan
President, RSSDI	President-Elect, RSSDI	Secretary General, RSSDI	Imm Past President, RSSDi