FEATURE

BMJ AWARDS SOUTH ASIA 2017

BMJ Awards South Asia 2017: hunting for the heroes of healthcare

Semifinalists have been selected and soon the winners will be announced, writes **Jeetha D'Silva**

Jeetha D'Silva freelance journalist

Mumbai, India

This year's BMJ Awards South Asia, which honour outstanding contributions to healthcare in the region, have received an overwhelming response. From 2015 nominations, 138 projects have been chosen as semifinalists.

These not only showcase the breadth and calibre of efforts to improve healthcare and patient outcomes in South Asia, they also indicate that the awards are considered an aspiration by the region's healthcare community.

Awarded annually by the BMJ, the parent healthcare knowledge company that publishes *The BMJ*, the South Asia awards recognise exemplary work being done in healthcare throughout the region.

Shortlisted nominations for this year's awards include live donor hepatobiliary transplant units in Pakistan and Sri Lanka; a research project to determine and improve maternal and fetal outcome among pregnant women after open heart surgery in Bangladesh; a project focused on pneumonia in Nepal; and projects that strive to improve mental health using information and communications technology.

Raising the bar

"Every year, we wish to raise the bar," said Prashant Mishra, BMJ's managing director in India and South Asia. "This year's awards will showcase the most spectacular achievements of doctors in South Asia, and help them receive the felicitations that they deserve."

This year, in its fourth edition, the awards received 2015 nominations among 10 categories, compared with 1523 nominations received last year.¹ India produced the most entries, with 1786 nominations, Pakistan produced 73, Bangladesh 53, Sri Lanka 52, Nepal 45, and Bhutan, Maldives, and Myanmar two each.

"The increase has not just been in the numbers of entries but also in their quality," said Prashant Jha, *The BMJ*'s senior editor in South Asia. "This is the first time we have had nominations from every country in the region."

The Research Paper of the Year award continues to be the most popular category, receiving 462 entries and making up almost a quarter of the total nominations. The Healthcare Innovation of the Year award received the second most entries (357), followed by Postgraduate Thesis of the Year (257).

This year sees two new categories that are particularly pertinent to South Asia: Maternal and Child Health Team of the Year and Mental Health Team of the Year.

"The region had an abysmal record in maternal and child health just a few decades ago," said Jha. "But in recent years the situation has improved dramatically, thanks to efforts by doctors, healthcare teams, and policy makers. Though we still have a long way to go, the progress made so far deserves recognition."

Storing breast milk for neonates

One of the semifinalists in the Maternal and Child Health Team of the Year category is a project to store breast milk at the government run district hospital at Hoshangabad in Madhya Pradesh.

The neonatal mortality rate is particularly high in rural areas of central India.² Nitesh Bais, who is in charge of the sick neonatal care unit (SNCU) at the hospital, told *The BMJ*, "We started the first SNCU at the district level in July 2010 and saved many neonates through medical intervention. However, we were lacking in nutrition for the babies. So as a team we decided to save mothers' milk. This has drastically improved the outcomes and reduced the impact of lactation failure in mothers," said Bais.³

One of the projects nominated for Mental Health Team of the Year—Raita Chetana—is a programme that hopes to tackle gaps in treatment for psychologically distressed farmers. Started by Raveesh BN, director of Dharwad Institute of Mental Health and Neurosciences (DIMHANS), the project has reached out to thousands of farmers in drought affected northern Karnataka.

"Farmer suicides are one of the biggest challenges that the rural community faces," Raveesh told *The BMJ*. Part of the reason is that farmers have little or no access to evidence based mental health support.

Raita Chetana started in 2015. DIMHANS approached the University of Agricultural Sciences (UAS), Dharwad, which serves six districts of Karnataka, and formed a team.⁴ This partnership set up a telephone helpline and an outreach clinic at UAS that is manned by a psychiatrist, a psychologist, a nurse, and a social worker who are deputed at the clinic on rotation. Over the past two years, the project has handled over 14 000 calls and treated hundreds of farmers at the clinic, which offers counselling and free drugs for a month. More serious cases are referred to DIMHANS for treatment. This model is being considered for other districts and states.

Telepsychiatry on a bus

Another mental health initiative is the Mobile Tele Psychiatry project started by the Schizophrenia Research Foundation in Chennai.⁵ R Thara, the foundation's director, said that the project caters for people with severe untreated mental disorders such as schizophrenia.

"We have customised a bus with equipment to connect with a psychiatrist in Chennai. There is a team of community health workers, social workers, a nurse, and a consultant GP to help identify patients who have severe mental disorders and bring them to the bus for a teleconsultation," Thara explained.

"The psychiatrist does a detailed interview, makes a diagnosis, and prescribes drugs, which are then dispensed from a pharmacy on the bus. These patients are then reviewed every two weeks, or as often as needed."

So far, over 2340 patients have been treated this way, and more than 60% have shown considerable improvement. The team also provides psychosocial interventions, both for patients and their families. This ranges from family education, support, and crisis care, to helping with employment.

Pregnancy after heart surgery

Inspiring healthcare champions from other South Asian countries include the author of a paper on maternal and fetal outcomes among pregnant women after open heart surgery. This paper, on work that has not previously been considered a priority, has been shortlisted in the Postgraduate Thesis of the Year category.

"The incidence of cardiac disease is quite high in the region and we have found that it is the primary cause of non-obstetric mortality in pregnancy," Redoy Ranjan from the department of cardiac surgery at the Bangabandhu Sheikh Mujib Medical University in Dhaka, Bangladesh, and the author of the paper, told *The BMJ*.

"Despite improvements in cardiac surgery and prognosis, women are still afraid of having children after cardiac surgery," said Ranjan. "Few women who have had the procedure become pregnant because many think that they are not fit for childbearing and rearing, though our clinical experience shows that if properly managed, outcomes of pregnancies after open

heart surgery are encouraging. However, there is no doubt these women require vigilant care for their mental and physical wellbeing during pregnancy."⁶

Ranjan is excited about the value that the BMJ South Asia Awards bring to health projects in the region. He said that winning the award could bring international recognition and might help influence the government of Bangladesh to allocate budgets and work further on developing social awareness, leading to reduced mortality of mothers and neonates.

Liver transplantation in Sri Lanka

One of the semifinalists from Sri Lanka is a team that is at the forefront of live donor hepatobiliary transplantation. Rohan Siriwardana, consultant gastroenterological hepatobiliary surgeon and senior lecturer in surgery at the faculty of medicine at the University of Kelaniya in Colombo, Sri Lanka, said that his team has performed the first successful live donor liver transplantation in the country and the first transplantation for acute liver failure.

Since 2013, the team has performed 18 liver transplantations and is the only centre in the country that performs live donor liver transplantation. "The main challenge is not having a strong donor programme. We hope that with the recognition that comes from a BMJ award we can ask the government for support to set one up," Siriwardana told *The BMJ*.

All the semifinalists have been selected after a thorough process that takes account of scalability, regional relevance, how close the project is to impact, and how the whole team is involved.

In the next stage, the semifinalists will send detailed descriptions of their projects. Three entries will be selected as finalists from each category. The finalists will be invited to New Delhi to present their work to a jury panel on 17 November. The winners will be announced at a ceremony on the evening of 18 November.

Keep up to date on the awards on social media at fb.com/BMJIndia and twitter.com/BMJIndia, with the hashtag #BMJAwardsSA17

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This year's awards

Excellence in Medical Education
Research Paper of the Year
Postgraduate Thesis of the Year
Surgical Team of the Year
Non-Communicable Disease Initiative of the Year
Infectious Diseases Initiative of the Year
Healthcare Innovation of the Year
Maternal and Child Health Team of the Year
Quality Improvement Team of the Year
Mental Health Team of the Year