



SCHOLARLY PUBLICATIONS School of Medical Sciences KIIT Deemed to be University

Journal Name: Clinical Microbiology and Infection

IF: 8.5

Title: Survival and quality-of-life in mucormycosis: a multicentric ambispective cohort study

Author: Verma, Sarthak & et al.

Details: 2025

Abstract: Objectives: We aimed to evaluate long-term survival and identify predictors of mortality among patients hospitalized with mucormycosis. Methods: This prospective, multicentre cohort study included patients hospitalized for mucormycosis across 26 sites in India from March to July 2021. Follow-up data were collected at 1-, 3-, 6-, and 12-month intervals post-discharge through telephonic or in-person interviews with patients or caregivers. Primary outcomes were survival, sequelae, and quality of life, assessed using the EURO-QOL 5D-5L scale. Survival analyses were performed using the shared frailty Cox proportional hazards model for predefined subgroups. Additional sensitivity analyses using inverse probability of censoring weights and marginal structural modelling were conducted to account for loss to follow-up and the time-varying nature of the treatment and confounders. Results: Of the 686 patients, 101 deaths (14.7%) occurred within 1 year, with a median survival time of 230 days. The majority of deaths (64.3%) occurred early, i.e. during hospitalization. Independent predictors of mortality included orbit involvement (hazard ratio [HR]: 2.0, 95% CI: 1.2–3.4), intracranial/cerebral involvement (HR: 2.6, 95% CI: 1.5–4.4), admission to an intensive care unit (HR: 6.4, 95% CI: 3.5–11.6), poor glycaemic control (HR: 2.3, 95% CI: 1.1–4.7), and other comorbidities (HR: 1.6, 95% CI: 1.0–2.5), and those associated with lower mortality were combination antifungal therapy (HR: 0.2, 95% CI: 0.1–0.4) and receipt of surgical treatment (HR: 0.1, 95% CI: 0.07–0.2). Survivors demonstrated improved quality of life, especially those who were gainfully employed. Sensitivity analysis indicated no major impact of loss to follow-up on survival. Discussion: Poor glycaemic control, severe disease, and involvement of the orbit or intracranial/cerebral regions predict higher mortality in mucormycosis. Aggressive therapeutic strategies, including combination of antifungal therapy and surgical interventions, substantially improved survival. The study highlights the importance of integrating psychological rehabilitation and socioeconomic support into management protocols to enhance the quality of life among survivors.



URL: <https://www.sciencedirect.com/science/article/abs/pii/S1198743X25002861?via%3Dihub>





SCHOLARLY PUBLICATIONS

Kalinga Institute of Medical Sciences

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Journal Name: The Lancet Regional Health - Southeast Asia

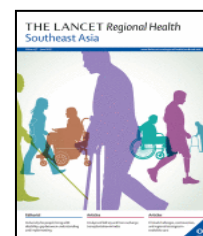
IF: 6.2

Title: A comprehensive assessment of health indicators among tribal populations in Odisha, India (Odisha Tribal Family Health Survey): a community-based, cross-sectional study

Author: Kshatri J.S.; AK K.; Rehman T.; Bhattacharya H.; Bhuyan D.; Mansingh A.; Sahoo U.K.; Nayak M.; Kanungo S.; Bhattacharya D.; Pati S.

Details: Volume 38, July 2025, Article number 100611

Abstract: Background: Indigenous tribal communities in the state of Odisha, eastern India, face persistent health disparities driven by socio-economic marginalisation, geographical isolation, and limited healthcare access. The Odisha Tribal Family Health Survey (OTFHS) aimed to comprehensively assess the health status, socio-demographic characteristics, and healthcare utilisation patterns of Odisha's tribal populations. Methods: A community-based survey was conducted between July 2022 and July 2023, covering 9711 households across 389 clusters in 14 tribal-dominated districts in Odisha. The study included 30,292 participants from 53 notified tribal groups. The study included participants of all age groups (from neonates to the elderly, aged 0 years and above), with 56% of the sample comprising females. Individuals belonging to one of the notified tribes who were permanent residents and provided written consent were included, while bedridden individuals and those with recognisable cognitive impairments were excluded. Data collection involved the use of structured tools at the household and individual levels, anthropometric measurements, point-of-care tests (including blood pressure, random blood glucose, and haemoglobin levels, as well as haemoglobinopathy screening), and laboratory analyses of blood serum samples (for liver function, kidney function, and lipid and iron profiles). Findings: OTFHS revealed that 88.0% of children aged 12–23 months were fully vaccinated and over 40% of children younger than five years were stunted or underweight. Anaemia affected 71.3% of children aged 6–59 months, with prevalence remaining high among adolescents (76.1% of females, 56.9% of males) and adults (77.5% of women, 42.1% of men). 93.0% of women had bank accounts and 91.4% of births occurred in healthcare facilities. Gaps persisted in antenatal care (40.3% completed four or more visits) and hygienic menstrual practices (35.8% of women).



URL: <https://www.sciencedirect.com/science/article/pii/S2772368225000824?via%3Dihub>





SCHOLARLY PUBLICATIONS Kalinga Institute of Medical Sciences KIIT Deemed to be University

Journal Name: Diabetes, Obesity and Metabolism

IF: 5.7

Title: Management of metabolic dysfunction-associated steatotic liver disease (MASLD) – An expert consensus statement from Indian diabetologists' perspective

Author: Zargar A.H.; Bhansali A.; Majumdar A.; Maheshwari A.; Bhattacharyya A.; Dasgupta A.; Saboo B.D.; Sethi B.K.; Sanyal D.; Seshadri K.G.; Deshpande N.R.; Kapoor N.; Lakhani O.J.; Talwalkar P.G.; Kalra P.; Mehrotra R.N.; Sahay R.K.; Shukla R.; Kant S.; Das S.; Agarwal S.C.; Phatak S.R.; Shanmugasundar G.; Joshi S.R.; Shaikh S.S.; Aravind S.R.; Goswami S.; Ghosh S.; Panikar V.K.; Mohan V.

Details: Volume 27, Issue S4, Pages 3 – 20, June 2025

Abstract: In India, the increasing prevalence of diabetes and obesity poses a significant threat towards a surge in the incidence of metabolic dysfunction-associated steatotic liver disease (MASLD), formerly known as non-alcoholic fatty liver disease (NAFLD). Concomitant with the evolving guidelines, there is a need to direct and spread awareness among practicing diabetologists to identify and screen high-risk individuals for MASLD for timely management. Its asymptomatic nature and the evolving guidelines on diagnosis have hindered the precise estimates of MASLD in the high-risk group of individuals in a clinical setting. Therefore, an expert panel of diabetologists from India convened to review, discuss and document the approach towards screening, diagnosis and management of MASLD. Serum biomarkers, simple non-invasive tools and imaging techniques could direct the risk stratification of the patients. Early lifestyle interventions including weight loss and exercise are beneficial. The pharmacological landscape of drugs directed to insulin resistance, lipid metabolism, oxidative stress, inflammation, apoptosis and fibrogenesis pathways for the management of MASLD is expanding. In summary, the consensus statements are expected to serve as a useful guide in the screening and management of MASLD in the region and to direct a well-planned study design that could enhance the scientific value of these statements.



URL: <https://dom-pubs.pericles-prod.literatumonline.com/doi/10.1111/dom.16496>





SCHOLARLY PUBLICATIONS Kalinga Institute of Medical Sciences KIIT Deemed to be University

Journal Name: RSC Advances

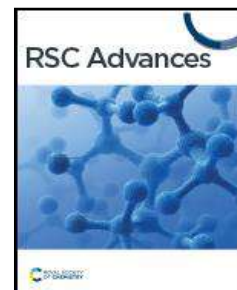
IF: 4.6

Title: Novel delivery strategy: finasteride-loaded solid lipid nanoparticles for improved androgenetic alopecia therapy

Author: Roy H.; Maddiboyina B.; Nayak B.S.; Bohara R.A.

Details: Volume 15, Issue 23, Pages 18715 – 18731, 4 June 2025

Abstract: Androgenetic alopecia (AGA) is currently the most prevalent cause of hair loss on the scalp. The daily administration of finasteride (FINA) by oral route may lead to the development of numerous undesirable systemic side effects. However, commercially available dermal dosage forms are available only with minoxidil; few studies have claimed severe side effects. Our study deals with the development of solid lipid nanoparticles (SLNs) of FINA with a suitable combination of 1- α -phosphatidylcholine (LPC) and N-trimethyl chitosan (NTC) to overcome limitations along with good skin retention and hair growth. FINA-SLNs were developed using the ultrasonication technique and characterized further, along with hair growth observed in the animal model. The formulation NP7 showed the highest zeta potential value of -16.5 mV. The absence of the 00000000 00000000 00000000 00000000 11111111 00000000 11111111 00000000 00000000 00000000 NH peak in the ^1H -NMR spectra could be due to the protons attached, which have substantial exchangeability and result in a probable disappearance in the NMR spectra. The investigation showed the highest skin retention of 226.76 μg of FINA by NP7, along with a modest amount of FINA permeated (71.23 μg) during the study period of 18 h. The animal model using C57BL/6 mice showed a notable enhancement in hair covering and growth in Group IV, which received treatment without any visible cutaneous reaction on the skin. This outcome underscores the effectiveness and importance of the formulation developed using a suitable combination of LPC and NTC, which could be used to manage AGA effectively.



URL: <https://pubs.rsc.org/en/content/articlelanding/2025/ra/d5ra00399g>





SCHOLARLY PUBLICATIONS

School of Medical Sciences

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Journal Name: Scientific Reports

IF: 3.9

Title: Epidemiology and risk factors for cerebral venous sinus thrombosis: insights from leading centres in the i-RegVeD registry, India

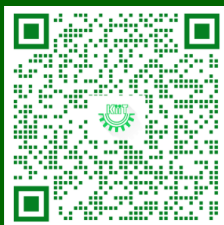
Author: Aggarwal, S; Kumar, A; Deo, V; i-RegVeD Team; Tabassum, H; Barman, B; Kulkarni, BP; Mohapatra, CKR; Kulkarni, GB; Hemachandren, M; Tiewsoh, I; Gnanaraj, JP; Vishwanathan, K; Kumar, N; Bhatia, V; Yadav, R; Lakshmi, KS; Qadri, SM

Details: Vol. 15, Issue 1, July 2025

Abstract: CVST is a rare cerebrovascular condition commonly associated with young adults and females. The primary aim of this study was to identify key risk factors associated with CVST and assess the outcomes of participants with CVST. This is an ongoing multicenter hospital-based study conducted from July 2022 to October 2023. A total of 152 CVST participants were selected from seven participating sites. The diagnosis of CVST was confirmed via a CT scan or MRI/MRV. Sociodemographic variables, i.e., lifestyle variables, type of objective testing, clinical presentations, risk factors and hospital outcomes, were recorded. The median (range) age of the CVST patients was 29 (0-69) years, with a significantly higher proportion of the registered CVST participants being males than females (63.8% vs 36.2%, $P < 0.001$). The peak frequency of CVST participants was recorded among those aged 21-30 years, accounting for 32.9% of the participants. The most common clinical manifestation was vomiting in 39.5% of the participants, followed by headache in 29.6% of the participants. The study identified young adults to be at increased risk of CVST (OR 0.28; 95% CI 0.18-0.42; $P = < 0.001$) and alcohol consumption with higher incident of CVST than never used alcohol (OR 1.95; 95% CI 1.17-3.23; $P = 0.010$) after adjusted for confounders. Study reported around 97% of participants were discharged after treatment, and mortality was reported in 3.2% of participants. CVST was strongly associated with males and young adults in this study, raising serious concerns. Alcohol intake was associated with a greater risk of CVST. The findings of this study could inform the development of region-specific protocols and targeted public health efforts, ultimately enhancing patient outcomes and reducing CVST-related mortality and morbidity in India.



URL: <https://www.nature.com/articles/s41598-025-07599-x>





SCHOLARLY PUBLICATIONS
School of Medical Sciences
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Journal Name: Immunologic Research

IF: 3.3

Title: Sustainability, intelligence, and more immunology: time to get back to the future!

Author: Ahmed S.

Details: Volume 73, Issue 1, December 2025, Article number 3



URL: <https://link.springer.com/article/10.1007/s12026-024-09554-w>





SCHOLARLY PUBLICATIONS

Kalinga Institute of Medical Sciences

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Journal Name: Journal of Clinical and Experimental Hepatology

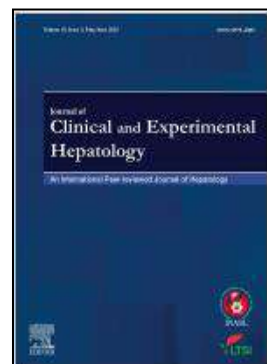
IF: 3.3

Title: Therapeutic Options for the Management of the Cholestatic Phase of Viral Hepatitis A and E-A Systematic Review

Author: Giri, S; Khatana, G; Gore, P; Praharaj, DL; Kulkarni, A; Anand, AC

Details: Volume 15, Issue 5, September–October 2025, 102557

Abstract: Background/Aims: The cholestatic hepatitis associated with acute viral hepatitis leads to prolonged jaundice and pruritus. While several treatment approaches have been proposed, there is a noticeable absence of agreement over the most effective course of action. The goal of this systematic review is to compile and assess the available data on treatment approaches for prolonged hepatitis associated with viral hepatitis. Methods: We comprehensively searched for relevant studies in MEDLINE, Embase, and Scopus from their inception to May 2024. Studies reporting the treatment option for the management of the cholestatic phase associated with viral hepatitis were included. Results: A total of 28 studies describing 164 patients were included in the review, of which 18 were case reports, 8 were case series, and 2 were interventional studies. The benefit of ursodeoxycholic acid (UDCA) was reported in two case reports, with doses varying from 10 to 30 mg/kg/d in the included studies. The use of corticosteroids in adult patients was reported in 21 studies, with prednisolone doses varying from 30 to 60 mg/day in adults. Two studies used nasobiliary drain (NBD) for patients who failed to respond to conventional therapy. Lastly, three studies reported using plasma exchange (PLEX) in patients refractory to standard treatment. Conclusion: Patients not responding to UDCA or cholestyramine may benefit from a short course of corticosteroids, suggesting an immune-mediated phenomenon. NBD placement or PLEX may be tried after analyzing the risk-to-benefit ratio for patients who are nonresponsive to corticosteroids. Further research is required to determine the optimal treatment strategy.



URL: <https://www.sciencedirect.com/science/article/pii/S097368832500057X?via%3Dihub>





SCHOLARLY PUBLICATIONS

Kalinga Institute of Medical Sciences

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Journal Name: Journal of Clinical and Experimental Hepatology

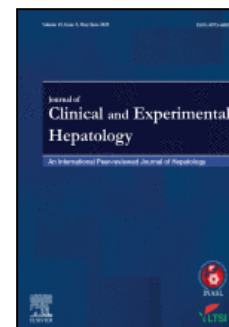
IF: 3.3

Title: Indian National Association for the Study of Liver (INASL) Guidance Statements for Determining

Author: Arora A.; Sharma P.; Kumar A.; Acharya S.K.; Sarin S.K.; Duseja A.; Puri P.; Shah S.; Chawla Y.K.; Rao P.N.; Saraya A.; Mohanka R.; Singh S.; Saighal S.; Rela M.; Vij V.; Asthana S.; Shukla A.; Bhangui P.; Saraf N.; Maiwall R.; Mandot A.; Saraswat V.; Madan K.; Shalimar; Kapoor D.; Anand A.C.; Gupta S.; Varghese J.; Mehta N.

Details: Volume 15, Issue 5, September–October 2025, 102539

Abstract: Liver transplantation (LT) is a life-saving procedure for patients with end-stage liver disease; however, with the growing shortage of organ donors, the need to identify futile transplants has become increasingly urgent. Futility in liver transplantation refers to situations where the expected post-transplant survival or quality of life is poor, making the procedure unlikely to yield a meaningful benefit. Various definitions of futility are used across different countries and transplant centers, with criteria often based on clinical factors such as age, comorbidities, MELD score, and functional status. For hepatologists and transplant surgeons, clearer guidelines are essential to make informed decisions and avoid unnecessary transplants that may place patients at risk without improving their prognosis. While some studies have proposed futility scores, there is currently no universal consensus on a standardized definition or set of criteria. This highlights the need for further prospective trials to evaluate the predictors of futility in liver transplantation, aiming to refine decision-making processes, optimize organ allocation, and improve patient outcomes. Future research should focus on the development of universally accepted futility criteria and explore interventions to mitigate the factors contributing to transplant futility.



URL: <https://www.sciencedirect.com/science/article/pii/S0973688325000398?via%3Dihub>





SCHOLARLY PUBLICATIONS

Kalinga Institute of Medical Sciences

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Journal Name: Journal of Clinical and Experimental Hepatology

IF: 3.2

Title: Adoption of the New Nomenclature of Metabolic Dysfunction-Associated Steatotic Liver Disease (MASLD) by the Indian National Association for Study of the Liver (INASL): Implications for the INASL Guidance Paper on NAFLD

Author: Duseja A.; De A.; Singh S.P.; Madan K.; Rao P.N.; Shukla A.; Choudhuri G.; Saigal S.; Shalimar; Arora A.; Anand A.C.; Das A.; Kumar A.; Eapen C.E.; Devadas K.; Shenoy K.T.; Panigrahi M.; Wadhawan M.; Rathi M.; Choudhary N.S.; Saraf N.; Nath P.; Kar S.; Alam S.; Shah S.; Nijhawan S.; Acharya S.K.; Aggarwal V.; Saraswat V.A.; Chawla Y.K.

Details: Volume 15, Issue 5, September–October 2025, Article number 102590

Abstract: The transition from nonalcoholic fatty liver disease (NAFLD) to metabolic dysfunction-associated steatotic liver disease (MASLD) reflects a paradigm shift in hepatology, emphasising metabolic dysfunction as the central driver in patients with MASLD. This inclusive terminology, endorsed by over 70 international organisations including the Indian National Association for Study of the Liver (INASL), reduces stigma of ‘fatty and alcohol’ and allows the co-existence of other liver disease etiologies along with MASLD. In the present commentary, we discuss the implications of the adoption of new nomenclature of MASLD on the INASL guidance paper on NAFLD, which was published in 2023, before the Delphi consensus on MASLD.



URL: <https://www.sciencedirect.com/science/article/pii/S0973688325000908?via%3Dihub>





SCHOLARLY PUBLICATIONS

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Journal Name: BioNanoScience

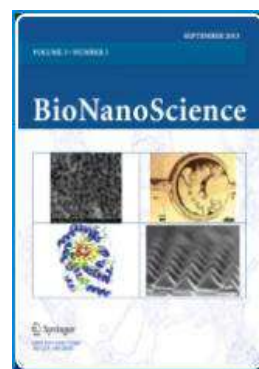
IF: 3.2

Title: Etoricoxib Emulgel: In Vitro and Ex Vivo Characterization for Development of Novel Topical Formulation—A Preclinical Study

Author: Sahoo S.; Nayak B.S.; Mohanty B.; Roy H.; Pradhan K.K.

Details: Volume 15, Issue 3, September 2025, Article number 325

Abstract: Emulgel is a novel topical formulation for the delivery of hydrophobic drugs. Etoricoxib is a cyclooxygenase II inhibitor by reducing the prostaglandins generation from Arachidonic acid. The present research aimed to formulate and develop an emulgel for the topical delivery of Etoricoxib for the management of inflammation. Emulgel was prepared by a combination of oil (Etoricoxib) and water phases in different proportions by homogenization. The drug excipient compatibility was confirmed by the FTIR study. The manufactured emulgels were characterized for pH, viscosity, drug content, spreadability, extrudability, bioadhesive, haemocompatibility, stability and drug diffusion as well as permeation studies. The optimized Etoricoxib emulgel was studied for skin irritation test and its potency to inhibit the inflammation by carrageenan-induced paw edema method. FTIR study revealed that Etoricoxib was compatible with excipients. The pH and viscosity of emulgels were found in the ranges of 5.5 to 6.2 and 2.2 to 2.8×10^4 cp. The drug content was more than 90% for all emulgels. As the oil amount was increased in emulgel, the spreadability was increased with good extrudability and bioadhesion properties. The emulgel was much potent to inhibit the inflammation as compared with the marketed gel. The emulgel containing 40 ml of olive oil at the 4:6 ratio of oil and aqueous phase (F4) was found to be haemocompatible and non-irritant to animal skin. The emulgel was stable at various storage conditions as per ICH guidelines. The emulgel (F4) diffuses and permeates (7.956 ± 0.97 and $1.591 \pm 0.88\%$ in 3 h) the drug in a more controlled and constant manner. Etoricoxib emulgel (F4 with oil and aqueous phase ratio of 4:6) was found to be the best emulgel formulation for the effective management of inflammation.



URL: <https://link.springer.com/article/10.1007/s12668-025-01978-4>





SCHOLARLY PUBLICATIONS

Kalinga Institute of Medical Sciences

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Journal Name: Journal of Clinical and Experimental Hepatology

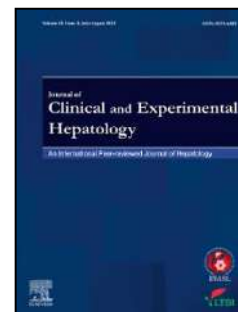
IF: 3.2

Title: Lifestyle Intervention is Effective in Reversal of Fibrosis in NAFLD Patients: Results from a Retrospective Real-World Study

Author: Singh S.P.; Anirvan P.; Chouhan S.; Panigrahi M.K.; Khatua C.R.; Hota S.; Rath M.M.; Kar S.K.; Misra B.; Nath P.; Sahu S.K.; Narayan J.; Singh A.

Details: Volume 15, Issue 6, November–December 2025, Article number 102598

Abstract: Background: Nonalcoholic fatty liver disease (NAFLD) is a lifestyle disorder, and lifestyle intervention (LI) remains the cornerstone of NAFLD management. Despite this, in recent years, the focus has been primarily on developing newer drugs and not on LIs, presumably due to a lack of medication adherence. We aimed to investigate the ability of LI to reverse fibrosis in NAFLD patients. Methods: Seven hundred seventy-six patients were retrospectively included, of which 565 patients were analysed. Anthropometric and biochemical parameters and 2D-SWE measurements of all patients were recorded before and after LI. Results: Weight reduction was observed in 85.2% of the patients. The mean body mass index (BMI) decreased from $26.08 \pm 3.53 \text{ kg/m}^2$ to $25.06 \pm 3.19 \text{ kg/m}^2$ ($P < 0.001$) in the cohort. The mean waist and hip circumferences decreased significantly from $98.87 \pm 8.72 \text{ cm}$ to $94.40 \pm 7.67 \text{ cm}$ and from $103.63 \pm 7.91 \text{ cm}$ to $101.98 \pm 7.17 \text{ cm}$, respectively ($P < 0.001$). Significant reductions in serum low-density lipoprotein ($112.93 \pm 33.23 \text{ mg/dL}$ to $104.12 \pm 31.10 \text{ mg/dL}$, $P < 0.001$) and very low-density lipoprotein ($34.05 \pm 19.43 \text{ mg/dL}$ to $30.26 \pm 12.58 \text{ mg/dL}$, $P < 0.001$) levels were also observed post-intervention. Decrease in liver stiffness was observed in 67.9% of the patients, and a one-stage reduction in fibrosis was observed in 40.5% of the patients, while a 2-point reduction in liver stiffness was observed in 52% of the patients; reversal of hepatic steatosis occurred in 16.4% of the patients. A significant reduction in liver stiffness was seen post-intervention ($7.21 \pm 1.84 \text{ kPa}$ to $6.61 \pm 1.59 \text{ kPa}$, $P < 0.001$). BMI reduction correlated positively with a decrease in liver stiffness ($r = 0.43$, $P < 0.001$). Conclusion: LI when sustained over a year can improve liver stiffness in NAFLD, even in a real-world setting.



URL: <https://www.sciencedirect.com/science/article/pii/S0973688325000982?via%3Dihub>





SCHOLARLY PUBLICATIONS

Kalinga Institute of Medical Sciences

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Journal Name: BMC Medical Education

IF: 3.2

Title: Perceived stress and academic achievement among medical students with different chronotypes: a cross sectional study on first year medical students from India

Author: Manjareeka M.; Dasgupta S.; Kanungo P.; Das R.C.

Details: Volume 25, Issue 1, December 2025, Article number 723

Abstract: Background: Chronotype, which denotes an individual's preference for morning or evening activity patterns, has been linked to variations in cognitive performance, sleep behavior, and stress levels. This study investigates the association between chronotype, perceived stress, and academic performance among first-year medical students. Methods: A cross-sectional descriptive study was conducted among 148 medical students at a private university. Chronotype was assessed using the Munich Chronotype Questionnaire (MCTQ), and perceived stress was measured using the Perceived Stress Scale (PSS). Academic performance was categorized into "Excellent" (marks > 65%) and "Average" (marks < 55%). Statistical analyses included independent t-tests, chi-square tests to evaluate differences and associations. Results: Morning chronotypes demonstrated significantly higher academic performance, with 49.1% in the "Excellent" group compared to 29% of Evening chronotypes ($p = .03$). Perceived stress scores were significantly higher among Evening chronotypes (24.9 ± 12.1) than Morning chronotypes (20.7 ± 9.3 , $p = .028$). Furthermore, Evening chronotypes exhibited longer sleep latency (41.17 ± 13.35 min vs. 14.49 ± 12.14 min, $p < .001$) and greater variability in weekend sleep schedules ($p < .001$). Gender differences in stress and academic performance were minimal and not statistically significant. Conclusion: Chronotype significantly affects academic performance and stress levels among medical students, with Morning types performing better academically experiencing less stress. Tailored strategies like flexible scheduling and sleep hygiene promotion can help Evening chronotypes overcome challenges, improving academic outcomes and psychological well-being.



URL: <https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-025-07281-w>





SCHOLARLY PUBLICATIONS School of Medical Sciences KIIT Deemed to be University

Journal Name: Journal of Clinical and Experimental Hepatology

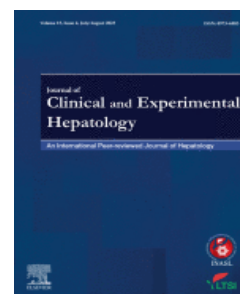
IF: 3.2

Title: Indian National Association for the Study of the Liver Position Statements on Prevention, Diagnosis, and Management of Hepatitis B Virus Infection in India

Author: Arora A.; Sharma P.; Dhiman R.K.; Duseja A.; Saraswat V.; Mohan V.G.; Sarin S.K.; Acharya S.; Singh S.P.; Rao P.N.; Rai R.R.; Anand A.C.; Dwiwedi M.; Misra S.P.; Goel A.; Kumar A.; Tyagi S.K.; Eapen C.E.; Babu S.; Jayanthi V.; Nundy B.; Puri P.; Kulkarni A.; Shalimar; Dadhich S.; Goswami B.D.; Malhotra P.; Thomas V.; Agarwal P.K.; Bhaumik P.; Kar P.; Wadhawan M.; Kumar M.; Chawla Y.; Mandot A.; Shukla A.; Madan K.; Saigal S.; Saraf N.; Kapoor D.; Chaubal C.C.; Pande G.; Bhadhuria A.; Venkatakrishnan L.; Sharma B.C.; Taneja S.; Chowdhary A.; Penackel C.; Maiwall R.; Nijhawan S.; Singh K.R.; Dixit V.K.; Sheony K.T.

Details: Vol. 15, Issue 6, November 2025

Abstract: Hepatitis B virus (HBV) remains a significant global health problem, particularly in India, where its prevalence is gradually decreasing, both in the general population and among healthcare workers. The management of HBV treatment should be individualized based on key factors such as HBV DNA levels, alanine transaminase (ALT) levels, and the presence of comorbid conditions like diabetes mellitus (DM), metabolic dysfunction associated steatotic liver disease (MASLD), pregnancy, cirrhosis, and decompensated cirrhosis. Hepatitis D was not considered a prevalent condition; thus, testing for it was not emphasized. Special conditions, including immunosuppression and steroid therapy, were also discussed, and INASL provided comprehensive guidelines to address these unique scenarios in HBV management. High-resistance-barrier drugs like tenofovir alafenamide (TAF) were highlighted for their effectiveness and safety, particularly in pregnant women. Vaccination was strongly recommended for special risk groups, including healthcare workers and high-risk populations, while the debate on universal screening and vaccination continues, weighing its potential benefits against logistical challenges.



URL: <https://www.sciencedirect.com/science/article/pii/S0973688325001082?via%3Dihub>





SCHOLARLY PUBLICATIONS Kalinga Institute of Medical Sciences KIIT Deemed to be University

Journal Name: Journal of Public Health

IF: 3.1

Title: Association of blood pressure with fasting blood glucose in Indian adults: a secondary data analysis of a clinical, anthropometric, and biochemical survey

Author: Panigrahi A.; Ray A.K.; Behera B.K.; Nayak S.

Details: Volume 33, Issue 6, Pages 1281 – 1286, June 2025

Abstract: Aim: Hypertension and diabetes continue to be among the major public health concerns worldwide, contributing to significant morbidity and mortality. The present study aimed to assess whether different blood pressure (BP) levels were associated with fasting blood glucose (FBG) levels using a national representative sample. Methods: A secondary data analysis was conducted using the data of an adult population from the state of Odisha, India, from the Clinical, Anthropometric, and Biochemical (CAB) survey (2014). The study population consisted of 54,477 adults aged between 18 and 70 years including 33,458 men and 21,019 women. Results: Quantile regression (QR) analysis was performed to identify associations of BP with FBG after adjusting for other confounding factors such as age, BMI, and Hb level. Distributions of systolic blood pressure (SBP) and diastolic blood pressure (DBP) were different according to sex. QR revealed that FBG was positively associated with SBP and DBP from the 10th percentile to 90th percentile ($p < 0.05$) in men and women. Conclusion: FBG is positively associated with BP in Indian adults.



URL: <https://link.springer.com/article/10.1007/s10389-023-02112-y>

