

PUBLIC HEALTH TRAINING

Master of Applied Epidemiology (Field Epidemiology Training Programme)

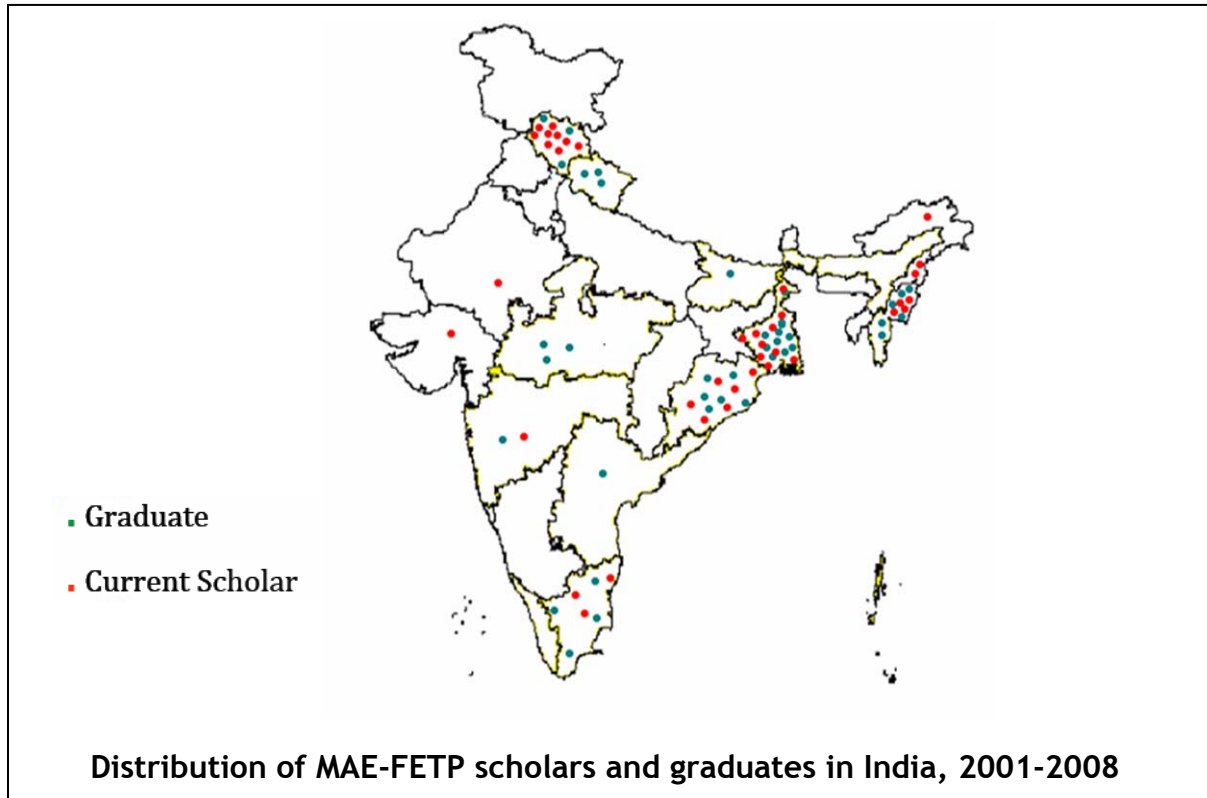
National Institute of Epidemiology has been conducting a two-year field epidemiology training programme (FETP) leading to Master of Applied Epidemiology (MAE). The course is an off-campus course of Sree Chitra Tirunal Institute for Medical Sciences and Technology, Thiruvananthapuram.

The highlights of the MAE-FETP during the calendar year 2008 are as under:

1. 19 scholars were admitted in the 2008 cohort
2. 16 scholars of the 2006 cohort graduated making a total number of graduates of the programme to 43.
3. 26 scholars from 2007 cohort will be completing their course work in Jan 2009
4. In order to involve the MAE-FETP graduates in mentoring, a training workshop on “Outbreak investigation mentoring” was conducted at the Swasthya Bhavan, Kolkata. Seventeen graduates from different states attended the workshop.
5. Established linkages with the field epidemiology programme at the National Institute of Communicable Diseases (NICD), New Delhi. Two scientists attended the Training of trainer’s workshop for Master of Public Health-Field Epidemiology at NICD.
6. Eight scientific papers based on scholars’ work were published while ten papers were submitted for publication.
7. 32 abstracts from the programme were accepted in international conferences (EIS Night, Atlanta: One oral, one poster; Fifth Global Scientific TEPHINET conference, Malaysia: 9 oral, 21 Poster).
8. An abstract of Dr. Sharmistha Mitra, (2006 cohort) titled “Outbreak of diarrhoea in North Barrackpur Municipality, North 24 Paraganas, West

Bengal, 2007 was adjudged as the best poster during the Fifth Global Scientific TEPHINET conference, Malaysia.

9. Two scientists joined as faculty for the programme.



Master of Public Health (MPH)

In order to address the acute shortage of trained public health human resources in the country, ICMR has decided to initiate the public health training by establishing Schools of Public Health. These schools will be using the resources and expertise already available in different ICMR institutes. ICMR has also developed a partnership (ICMR Partnership for Schools of Public Health, IPSPH) with several national and international institutes involved in public health training. The main focus of ICMR Schools of Public Health would be training the health professionals already working in various state public health departments.

The first ICMR School of Public Health was established at the National Institute of Epidemiology, Chennai in October 2006. The Master of Public Health (MPH) programme of ICMR School of Public Health commenced from 1st July 2008. Thirteen medical officers deputed by different state governments (Himachal Pradesh - 1, Uttarakhand - 6, Manipur - 2, West Bengal - 2, Karnataka -1, Kerala - 1) have joined the first batch of MPH programme.

The MPH curriculum includes 12 core courses that would be offered to all the students over first 15 months followed by three months' elective courses and last six months for conducting the dissertation. As of December 2008, four core courses viz. Principles and practice of Public Health, Epidemiology principles and methods, Bio-statistics and Infectious Disease Epidemiology have been completed. Faculty for these courses was scientists from NIE, ICMR institutes as well as non-ICMR partner institutes.

Four elective courses will be offered to the students of the first batch of MPH: Chronic pulmonary diseases (TRC, Chennai), Public health aspects of HIV/AIDS (NARI, Pune), Public health nutrition (NIN, Hyderabad), Vector-borne diseases (VCRC, Pondicherry, CRME, Madurai and NIMR, Delhi).

Workshop on Forensic Epidemiology

The threat of bio-terrorism and aftermath of outbreak of diseases can be disastrous and devastating. India has been exposed in the near past to such outbreaks e.g. SARS, Bird Flu, Anthrax etc., tackling which requires a scientifically valid and coordinated response from multiple sectors. Lack of coordination, and awareness and prejudices could be obstacles for quick and effective response. Thus there is a need for sensitization of experts from various fields, including health and law enforcement, especially the first responders.

As part of the bilateral efforts between the Indian and United States governments to increase prevention and preparedness, bio-security, and threat awareness to combat terrorism, a “Train the Trainers Workshop on Forensic Epidemiology” was organized in Chennai from 16 - 19 September, 2008. The workshop was organized jointly by Federal Bureau of Investigation (FBI), USA, Centers for Disease Control (CDC), USA with faculty members from TRC and NIE, Chennai.

The workshop was attended by 27 professionals including law enforcement personnel, microbiologists, public health officers, and forensic experts. The workshop brought in experts of various fields on a common platform not only for exchange of information but also understanding each other’s role in tackling with emergencies such as a bioterrorism event.

As an outcome of the workshop a core committee made the following recommendations:

- a) Integrated Disease Surveillance Project (IDSP) launched by Ministry of Health, Government of India does a periodic surveillance of diseases, based on case reporting from health centers at various levels in the

district. IDSP mechanisms help in detecting clusters of disease outbreaks. Relevant inputs are required to be shared with identified law enforcement agencies/Intelligence Bureau (IB).

- b) Inputs from law enforcement agencies/IB potentially related to public health should be shared with appropriate health authorities.
- c) List of trained epidemiologists and key public health personnel needs to be shared with Central/State law enforcement agencies. This would facilitate the district administrative authorities in organizing timely epidemiological investigations in conjunction with criminal investigations.
- d) There is a need for sensitizing the field level law enforcement personnel and health workers. This will ensure timely exchange of information and professional handling of a disease outbreak/disaster situation.
- e) There is a need for sensitizing in “forensic epidemiology” of all officials involved in regulating the entry points/check-posts, such as CISF, Customs, Immigration, Airport authorities/Navy, etc.
- f) There is a need for including “forensic epidemiology” in the course curriculum for the law enforcement and public health officials.
- g) There is a need for intersectoral trainings and infrastructure development at regional level across the country, including supply of equipments and protective gear during investigations of bioterrorism events.
- h) Ministry of Health should organize periodic sessions to sensitize the law enforcement and other related agencies about recent disease outbreaks with high morbidity and mortality in the country.
- i) Emergency mock riot drills/exercises are conducted by law enforcement agencies. Similar mock drills for bioterrorism events involving law enforcement and the public health agencies should be part of joint training exercises.

Controlled Clinical Trials

The department, established in 2007, essentially to coordinate the “Golden Triangle Partnership (GTP)” clinical trials, carried out the following tasks in the year 2008:

- Coordinated with BMS Division ICMR in finalizing the protocols of BPH and Osteoporosis trials (Submitting them as new proposals)
- Conducted 2 training programme in Controlled clinical trial (one exclusively for the M.Sc Biostatistics students of Vaishnav College, Chrompet, Chennai).
- Conducted GCP training for trial PIs of BPH trial and also got trained three statisticians of the Department on GCP. About 20 participants were trained during the course held in October 2008. Dr Nandhini, Consultant, GTP trials, and the Division of BMS, ICMR coordinated the activity.
- Drafted the syllabus of a three-week course on ‘Advanced Statistical Methods in Epidemiology’ and propose to conduct the same in January-February 2009. WHO has nominated 2 candidates for the course.

The Department proposes to recruit staff, acquire necessary software and training to handle several forth-coming multi-centric clinical trials during the next year.

