PRESIDENT'S MESSAGE

The message in a nutshell and essence is – <u>"REACH OUT, SPREAD OUT, GATHER DATA"</u>

It gives me great pleasure to avail of this opportunity to pen down a small account of the journey DFSI had gone through, look at the present state and envision and dream of how it would and should be in the next few years. As a founder member and now, as the president, it is indeed a great moment to share that the vision of the founders has indeed been what two of what my message for this year is viz., "Reach out, Spread out". The magnitude of the problem of diabetic foot is well known- as also the the lack of reach and spread of the knowledge leading to improper treatment leading to avoidable major amputations. It is not the lack of knowledge but the lack of the trained people to handle this huge problem. As a unique society we have reached out to all the various allied specialities including the paramedical and the industry to come under one roof with the aim of sharing and enabling the diabetic foot health care worker empowered and confident in preventing higher level amputations. Clinician, Science, and Industry must be hand in hand for the initiation, interpretation, and the implementation of an idea. DFSI has been active in spreading and sharing important knowledge by conducting conferences and the publication of a handbook which has been very well accepted. DFSI has also been very successful in spreading out in India and to the world. Following a brief period of silence, we owe it to untiring efforts of the centres in Ahmedabad who revived it followed by PGI Chandigarh who have been instrumental in putting the society on a strong footing to go to further heights. Chennai team saw a massive spread out to involve the PAN Asian diabetic foot societies come together and actively participate thanks to the efforts of Rajesh and his team. In addition to scientific and clinical contribution, substantial financial one too, a whopping Rs 60 lakhs was then contributed by the Ganga group from Coimbatore. Recognition by almost all world diabetic foot societies of the efforts of Dr Bal is a great moment for DFSI indeed and an example of the reach and spread of DFSI itself.

The present saw Covid 19 pandemic, which has thrown fresh challenges and a lot has been learnt. DF is in an epidemic form. It is said that "an epidemic will remain an epidemic till the focus shifts to prevention" as also exemplified in a 2000-year-old saying in Tamil. "நோய்நாடி நோய்முதல் நாடி அதுதணிக்கும்வாய்நாடி வாய்ப்பச் செயல்". nōynāṭi nōymutal nāṭi atutaṇikkum vāynāṭi vāyppac ceyal. Meaning - Diagnose the illness, trace its cause, seek the proper remedy and apply it with skill. DF is considered almost an epidemic proportion. An all-out effort to get a vaccine has helped in the covid situation. In the absence of such massive conceivable effort for DF in the foreseeable future, a novel and more effective methods must be evolved

Revisiting "Reach out and Spread out "must be reworked. All the accolades mentioned above must continue and go beyond. It is the vision of this new

executive committee that each member of DFSI become an active and involved stakeholder to help disseminate knowledge in whatever form possible. To that end, this year we have envisioned a programme to facilitate and help the members who want to get involved. It is realised that the society should work for the benefit of the members. Committees have been formed for implementing some of the long-awaited projects. Members are requested to come up with ideas and projects and take advantage of the great teachers and trainers to implement these ideas. Finance will be provided for deserving and appropriate projects proposed by the members. The key ones are fellowship programme, research programmes, website mediated knowledge gathering and dissemination. Patient centric programmes initiated by the doctors and the allied paramedical health care worker will be given all help.

Digital media and web site interactions including the virtual meetings have become the norm. It is my wish that many programmes are proposed by the members and DFSI will provide all help and financial assistance. The last part of the message is gathering data. The digital world has enabled us to communicate and interact almost instantaneously. With access to enormous wealth of knowledge, we need to define how and what is to be harnessed and how to use it and disseminate what we have learnt. Much clarity is got when we can define ourselves as who we want to be and choose a role for a particular occasion. You could be an Adyapak- a person who just gives information (very much like google), An Upadyaya, one who gives knowledge combined with information; an Acharya, who imparts skill; a pundit who is able to give a deep insight into a subject; a dhrishta, a person who has a visionary view of the subject and finally Guru, the most misused term however. Guru is someone who will awaken the wisdom in you leading you from darkness to light.

The research wing has laid down guidelines for the members to take part in research. We all have a lot of clinical data. We as Indians are always criticised for not having proper primary scientific analyses done on the vast clinical material. Gathering data is one of the prime intents of the research wing. Please liase with the team to enable and finance you.

Lastly let me quote Adi Shankacharya (a Acharya)

"Ka Khalu nalankriyathe drushti drushtartha sadhana Pateeyaan, Amuya Kanta sthithaprasnothara rathna malikaya".

Let us gather the pearls and gems of knowledge from questions and answers, make a necklace, and wear it proudly in our necks for it to be available with us always. It is not enough to wear it, but it must undergo sadhana (exercised and practiced) in a smart way(pateeyaan) for use in the present and in the foreseeable and unforeseen circumstances in the future.

Let us reach out to our peers, allied groups, patients, and the public.