

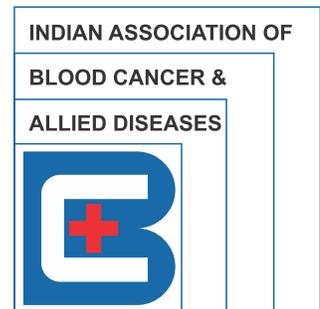


SURVIVE THRIVE TRANSFORM

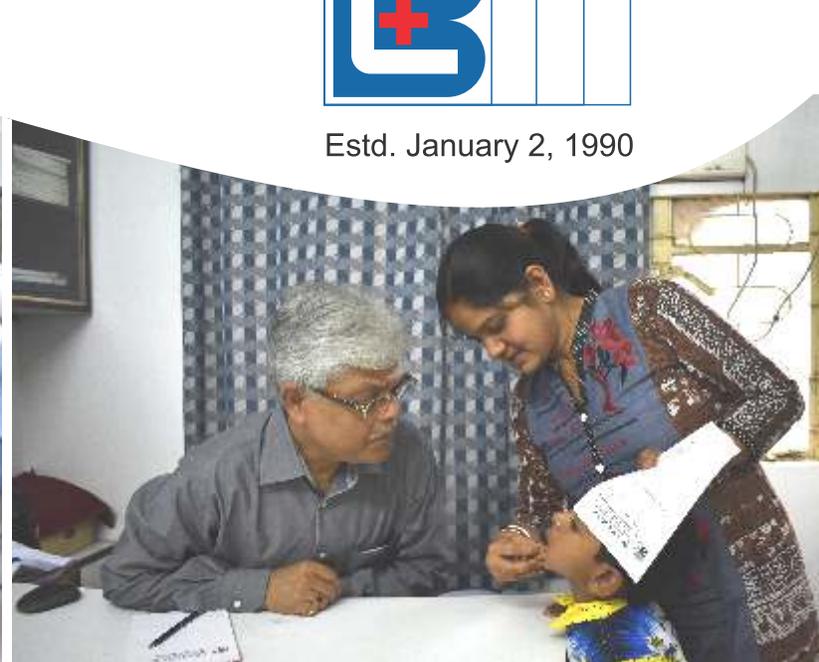
Empowering
Humanitarian
Decisions

IMPRESSIONS

2018 2019



Estd. January 2, 1990



Highlights

- 1989-1990 – Registration of the association under West Bengal Societies Registration Act and Income Tax Act 1961.
 - Introduction of ambulance service.
 - Promotion of voluntary blood donation.
 - Sponsorship programme for treatment of patients.
- 1990-1991 – Continuation of ambulance service.
 - Blood donation.
 - Treatment of patients.
- 1991-1992 – Beginning of project work, blessed by Mother Teresa on March 5, 1992.
- 1992-1993 – Setting up information, education and communication unit.
- 1993-1994 – Computer services unit inaugurated.
- 1994-1995 – Acquiring new premises for blood centre for children.
- 1995-1996 – Completion of first phase of project, blood centre for children inaugurated by Mr. A. B. N. Morey, British Deputy High Commissioner, Calcutta.
- 1996-1997 – Opening of modern blood bank.
- 1997-1998 – Opening of blood transfusion centre.
- 1998-1999 – Acquiring of instruments for blood components unit.
- 1999-2000 – Extension unit for blood centre for children.
- 2000-2001 – Opening of blood research centre, blood components unit.
- 2001-2002 – Beginning of work of Indian Academy of Transfusion Medicine.
- 2002-2003 – Oncology social work programme.
 - Establishment of rural community clinic.
- 2003-2004 – Cancer Life Centre.
- 2004-2005 – Certificate of Registration ISO 9001:2000.
- 2005-2006 – Setting up unit for cell counter & immuno analyser.
- 2006-2007 – Established international network system.
- 2007-2008 – Initiated short stay home in Delhi and partnership programme with Indian corporate.
- 2008-2009 – Exchange education programme with national and international universities.
- 2009-2010 – Standardisation of blood banking operating and quality control system.
- 2010-2011 – Up-gradation of blood components preservation unit.
- 2011-2012 – Introduction of gel technology for blood banking services.
- 2012-2013 – Specialised mobile medical services.
- 2013-2014 – Up-gradation of blood components preparation unit.
- 2014-2015 – Installation of new microprocessor high speed centrifuge.
- 2015-2016 – Modernisation of blood collection room.
- 2016-2017 – Installation of advanced high speed centrifuge for preparation of blood components.
- 2017-2018 – Advancement of blood collection and blood safety procedures.
- 2018-2019 – Modernisation of blood centre and setting up new quality control unit for blood products.





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The Association

Indian Association of Blood Cancer & Allied Diseases (IABCD) is a registered, voluntary, national level, medical support service organisation, dedicated to provide medical, education, counselling and other rehabilitative services to improve the quality of lives of children suffering from blood cancer i.e. Leukaemia and other blood diseases like Thalassaemia, Haemophilia etc.

The association (IABCD) is registered under West Bengal Societies Registration Act, 1961 with No. S/63715 of 1989-90. Donations made to IABCD is exempted under section 80G of Income Tax Act, 1961 with No. DIT(E)/8E/15/90-91/728 dated 17.03.2008, which is valid for the assessment year in perpetuity vide letter No.DIT(E)/8E/15/90-91/2439 dated 20.05.2011 issued by DDIT (E-I), Hqrs, & Admn. Kolkata. Our PAN No. is AAAAI0249N.

Mission

IABCD) is a multidisciplinary organisation dedicated to promoting optimal care to improve the quality of life for children and adolescents affected by blood disorders and blood cancer by advancing research, education, treatment and professional practice.

Objectives

- a To promote and organise voluntary blood donation services.
- b To coordinate with medical centres for the purpose of diagnosis and treatment of patients suffering from blood cancer and allied diseases such as Leukaemia, Thalassaemia, Haemophilia etc.
- c To provide support services for the rehabilitation of patients and dependents.
- d To develop the centre for education and counselling.
- e To acquire, build, hire, maintain and run research laboratory and related facilities while equipping them with amenities considered necessary for proper discharge of the functions of the association.
- f To print, publish, exhibit, and subscribe periodicals, books, pamphlets, posters etc., that may be considered for the desirable promotion of the objectives of the Association.



IABCD's Results and the principles of shaping team interactions with patients, partners and donors

Trust : We believe that patient care starts with trust, focus on individual with human dignity and by creating healthy and equitable societies.

Systems-level change : We focus on systems-level change from care to scientific innovation to citizens' engagement, because we believe it's the best way to achieve large-scale, lasting results.

Evidence & new perspective : We believe that local voluntary blood donor organisations, youth organisations, Government officials, civil society leaders and social innovators – are the people who can bring about 'lasting change and hope' for patients suffering from blood cancer and other blood diseases.

Focus on scientific knowledge and resources : Our primary focus is patient's safety and safety of blood donors; offering scientific perspective with global evidence of our work. We listen to patients and family members – their needs. We build on existing expertise and work alongside them to provide care, generate knowledge and treatment protocol that can be applied to real patients' problems.

Universal lessons : We synthesise important global knowledge intended to catalyse action across the world. The research we do is applied – practical, context-specific and most importantly demand-driven. The implementation we do is strategic, resulting in large-scale impact and universal lessons.

Collaborative learning : We believe we will achieve more together. Whether we're co-

creating with local partners, donors, policymakers or practitioners and encouraging collaborative learning and problem-solving, we believe that engagement among varied stakeholders will lead to greater (and faster) progress.

Informed decision making : We have deep technical expertise and lots of practical experience, and rely on evidence to guide us. Evidence may be generated through careful analysis or through experimentation and testing – regardless of the method, it is essential for informed decision-making.

Partnership and Collaboration : We build collaborations between citizens, research institutions and Government to ensure that the priorities and feedback of beneficiaries are helping team to provide better services.

Strengthen open governance : We encourage open data programme analysis for analysing cost, benefits and impact on medical care.

Analyse accountability : We take a unique approach to transparency, accountability and citizen engagement that requires understanding the issues, patients' problems, problems of families, cost of care and health outcomes along with social benefit.

Mission-driven and results-focused : We go beyond simply carrying out deliverables – patient care. We approach every effort with passion and full expertise of the organisation. This leads to strong relationships and deep, multi-year engagements that help our patients and partners achieve more robust results.

President's Remark



Synergising Resources
and Knowledge
to further
Scientific Vision

Indian Association of Blood Cancer & Allied Diseases (IABCD), a research based blood centre established on January 2nd, 1990, has been contributing to the history of science, transfusion medicine and public health for over 30 years. It operates in a highly international context, with a network of 72 social organisations and has four large public interest missions: research, education, public health, and valorisation of scientific research via technology transfer. In keeping with the humanistic nature of its members, and humanitarian mission of the organisation, the association explores the spirit necessary for conducting advanced transfusion medicine, biotechnology and biomedical research.

Today we are living in times of advancement in science, medicine and public health: the emergence of new founding concepts born of fundamental research, the development of extraordinarily efficient medical technologies and a new awareness of the challenges to global health in general and in specific blood cancer and blood related diseases are disrupting our way of thinking and of conducting research as well as medical care services.

After having the privilege to serve over 25 years as the Honorary Board President of IABCD, I have never been more excited and confident in our ability to meaningfully impact the future of transfusion medicine and cellular therapies industry. It is invigorating to set new goals and approaches for continued advancement in the years to come.

IABCD's mission to strengthen voluntary blood donor network, quality assurance of blood testing, product preparation, preservation and scientific use of blood products for the benefit of patients. Each of these priorities are essential, and held in balance by an overall strategic mission that puts the association's work and its services to haematological disorders, scientific study and research at the heart of advances in tomorrow's science, transfusion medicine and public health.

It is an honour to convey my sincere gratitude and thanks to all members on board including past members, volunteers, donors and the dedicated team members for their continued commitment to IABCD's services and donors' investment in the future of transfusion medicine and cellular therapies.

Looking forward, I encourage your continued involvement in the future as we take our initial steps towards delivering the next decade of service.

Amalendu Pal
President

Kolkata, April 4th 2019

Medical Directors' Note

Collaborating for the better - patient care, medical research and innovation

It is 2019 and we can be confident that in ten years the world will be quite different from today. International medical practices, collaborative relations, partnership structures and patient care will alter. There will be new approaches to dealing with cancer care, blood diseases, epidemics, social issues, medical technology, shortages of resources and environmental crises. New challenges will arise.

In a context of intense global research, in both health and science and with the emergence of new threats, the association – Indian Association of Blood Cancer & Allied Diseases (IABCD) needs to review its scientific priorities, application of medical technology, new devices and strategic short-and medium-term medical orientations both for blood product improvement, quality and patient care with cost effective approach. The scientific vision of IABCD aims to clarify the major issues we intend to address, while maintaining high-level curiosity-driven research and result oriented patient care. Our ambition is to meet the present and future human health challenges, by accelerating our understanding of physiological and pathological processes, and by developing novel strategies of diagnostic, prevention and treatment of diseases.

We support an atmosphere and culture that embraces medical care and compassion while continuing to be guided by our mission of achieving enduring excellence in patient medical care and blood banking services for the benefit of society. What we do, shrinks the time and distance between medical research and societal benefit. Our team is provided with knowledge and experiences that equip them for their future roles as leaders. We have the courage to take risks and remain true to our mission.

While we cannot envision all of the challenges ahead, we believe that IABCD can contribute by focusing our medical research around four themes: quality improvement of blood products and network of care givers; biotechnology novel solutions; health and well-being; and leading the data revolution.

In our future plan of action 2019–2022 we set out how IABCD will be a source of new solutions for caring for patients suffering from blood cancer and blood diseases including development of blood products to tackle new diseases, a contributor to a better future, a trusted partner for patients and their families and a new paradigm of the academia and research laboratories.

Kolkata, April 4th 2019



Sourav Ghosh

Dr. Sourav Ghosh
Medical Director



Asok Sarkar

Dr. Asok Sarkar
Medical Director

A scientific vision that is born from curiosity and interdisciplinary sciences



IABCD needs to deploy a strategy that is both multidisciplinary and based on scientific discovery. The scientific project that we will develop will include various disciplines for better impact of IABCD's work, namely: microbiology and infectious diseases, immunology, developmental biology and regenerative medicine, neuroscience, genetics and cancer. In conjunction to this approach, the identification of themes common to the different scientific disciplines must be the subject of incentives and engagement of researchers in the areas such as basic mechanisms of life (such as epigenetics, co-evolution of human and bacterial genomes, microbial physiology, structural biology and its interface with cell biology, with the analysis of macromolecular complexes etc.). Projects integrating different scientific components will also be developed (such as the interactions between hosts, vectors and pathogens, genetics and polymorphism of the host, microbiota and populational analyses in microbiology, inflammation and oxidative stress etc.)

Besides it, IABCD will play a major role in the emerging link between microbes and non-communicable diseases: obesity and diabetes, cancer and neurodegenerative diseases, chronic pulmonary diseases, etc. Thus, transversal programmes will be implemented in such a way as to strengthen an interdisciplinary approach on specific topics such as gut microbiota and neuroscience, interactions between infection, nutrition,

metabolism and cancer. Finally, the scientific strategy of the Institute will take better account of the importance of technological research.

In future, a new research organisation will be established, which should permit IABCD to better synergise the skills of different research departments and institutes within the international network, in order to better address major research issues. In this respect, IABCD will regroup its strengths and talents around specific subjects: translational research (IABCD Centre for Biotechnology & Translational Science), public health, bioinformatics and integrative biology. Research infrastructures and technological platforms will be strengthened and their activities better coordinated by the Centre for Innovation and Technological Research.

Transversal and incentivised programmes will also be introduced. They will provide support in the area of mycology, Dengue or the impact of non-coding RNA in microbiology, the link between microbes and neuroscience, the interaction between infections and nutrition and metabolic diseases in the genesis of cancer.

In a context of intense global upheaval, in both health and science and with the emergence of new threats, IABCD needs to review its scientific priorities and strategic short and medium-term orientations. The scientific vision of the association (IABCD) aims

to clarify the major issues we intend to address, while maintaining high-level curiosity-driven research.

Research priority, new science and health challenges

The major threats that include a longer life span expectancy and its associated pathologies – cancer, diabetes/ metabolic disorders, neurological and cardiovascular diseases, global warming, globalisation and its environmental consequences, the emergence of new viral, bacterial, parasitic or fungal epidemics, and the resistance of pathogens to drugs.

Innovative cutting-edge technologies are now opening novel areas of, biotechnology, and biomedical research.

Scientific vision – innovative and complimentary

The main objective of IABCD is to meet these present and future human health challenges, by accelerating team understanding of physiological and pathological processes, and by developing novel strategies of diagnostic, prevention and treatment of diseases. These basic, and applied biomedical questions require the use of state of the art technologies and the development of new ones.

IABCD will reinforce partnerships with other research institutes and universities, in which additional expertise is found. These collaborations should bring innovative and complementary visions. Translational research will also be a curiosity-driven research at the highest level.

Patient Care, Humanitarian Landscape and Scientific Vision

IABCD Blood Centre for Children is on a mission to enable local humanitarians to provide life-saving healthcare to patients devastated by blood disorders like Thalassaemia, and other blood diseases including blood cancer. Our medical team works as an advocate for the patients, upholding medical neutrality, the localisation of medical care, humanitarian aid and patients' rights – “Right to Have Safe Blood Transfusion” as a basic human right.

The advancement of medical care and scientific process covers a diverse range of targeted treatments of haematological cancers like Leukaemia, Lymphoma and Multiple Myeloma. New approaches such as epigenetic modifiers and inhibitors of Bcl-2 and B cell receptor signalling are introduced to have the possibility of personalised treatment.

Haematological processes aims to bridge the interests and practices of both; those carrying out laboratory work and those whose main inclination is towards patient care. It covers all related features associated with cell growth, blood and dysfunction, like General Haematology, Oncology, Pathology, Biology, Clinical research, Epidemiology, Thalassemia and Leukaemia.

Blood transfusion is a medical therapy that can be life-saving. As with any treatment, however, transfusion of blood or blood components must be ordered and administered safely and appropriately. Transfusion is more than a single discrete event, it is a process. The transfusion chain begins with donor considerations (whether the donation is safe for them to make and whether it's safe for any patient to receive). Once blood is collected, the safety of the blood product is a focus of activity (infectious disease testing, compatibility testing, necessary modifications such as irradiation or leukocyte reduction). The endpoint of transfusion process involves recipient considerations (proper identification of the unit and the patient, appropriateness of blood as the best treatment modality, administration of the unit and evaluation of the recipient).

For safety transfusion practices; detailed information on blood donation, a standardised donor history questionnaire, use of human blood and blood components, and fact sheets on emerging

infectious diseases are followed as per standardisation and quality control procedures. Doctors and other members of the medical team carefully observe highlights of transfusion medicine history, consequences and reactions if any.

Patient Blood Management (PBM)

It is an evidence-based, multidisciplinary approach to optimising the care of patients who might need transfusion. PBM encompasses all aspects of patient evaluation and clinical management surrounding the transfusion decision-making process, including the application of appropriate indications, as well as minimisation of blood loss and optimisation of patient red cell mass. PBM can reduce the need for allogeneic blood transfusions and reduce health-care costs, while ensuring that blood components are available for the patients who need them.

PBM also provides medical services to patients suffering from Thalassemia. Majority of patients continue their services on a long-term basis – more than 15 years.

Emotional support/ counselling

Counselling has made a really positive change to many people's lives and it can do the same for others.



Forms of treatment vary depending on the type of Leukaemia

Chemotherapy

Treatment using anticancer drugs. Chemotherapy acts on all the body's cells and is circulated throughout the body by the blood stream. It is sometimes known as cytotoxic therapy because it is poisonous to all the cells whether they are cancerous or not.

Radiotherapy

Radiotherapy is a localised treatment. It kills cancer

cells in the area of the body being treated and is therefore an effective treatment for localised disease, particularly in lymphoma and multiple myeloma. Side effects will vary according to the type of treatment.

Bone marrow and stem cell transplantation

Bone marrow transplantation is the replacement of a patient's own bone marrow with that provided by a suitable donor. Bone marrow/ stem cell transplantation has an important role to play in the treatment of leukaemia since it allows the use of intensive chemotherapy and radiotherapy that would otherwise leave the marrow permanently damaged.

Blood Centre: Love Transfusion



IABCD blood centre has four key areas:

- Blood collection
- Testing of blood donations
- Processing of blood donations
- Blood banking

Blood collection

IABCD is committed to maintaining a system of blood collection based on the principle of voluntary blood

donation. This is recognised as the first, and one of the most important mechanisms, by which the safety of the blood supply is assured. This is achieved by the implementation of consistent national standards for the assessment of donors and for the collection process.

Processing of blood donations

Processing of blood donations is done as per the guidelines of drug control authority and other prescribed bodies. Processing involves the

separation of donated blood into blood components – principally red cells, platelets and fresh frozen plasma. These include:

- The introduction of standard approaches to the manufacturing process;
- The application of principles of ‘Good Manufacturing Practice’, thus assuring safety and quality of components;
- The realisation of economies of scale, both in relation to equipment and staff and;
- The capability to respond to blood and components safety requirements.

Testing of blood donations

Accreditation testing is centralised at the IABCD laboratory. Accreditation testing of all blood donations involves two distinct processes: blood grouping and screening for infectious markers.

Cancer Risk Factors, Prevention and Research

Globally tremendous efforts have been invested in the fight against cancer and considerable improvements have been made in therapeutic options over the past years. However this disease still remains a major causes of human mortality. It is thus of paramount importance to put further efforts into better understanding the biology of cancer and developing means to improve diagnosis and therapy.

Considering its seriousness the research programme are focused on:

- Integrating laboratory research, epidemiology and clinical research.
- Compiling and extending collections of biological samples and databases.
- Integrating genome, proteome, and biomarker research on the cause and prevention of cancer.
- Studies on lifestyles, metabolism and cancer.

Blood banking

Blood banks are the pretransfusion testing laboratories where blood products are matched to suit each individual patient. This includes determining the patient's blood type and matching this with appropriate products. In addition, IABCD has dedicated serology laboratories performing specialist investigations of unusual and complicated patient cases. To ensure the highest quality and patient safety, IABCD also conducts regular quality audits of its blood bags, blood and products.



Blood Banking

Year	No of patients benefitted	Voluntary blood donors	Engagement of youth leaders
2018-2019	3,963	3,886	122
2017-2018	3,610	3,360	86
2012-2017	23,457	30,437	848

Institutional Services

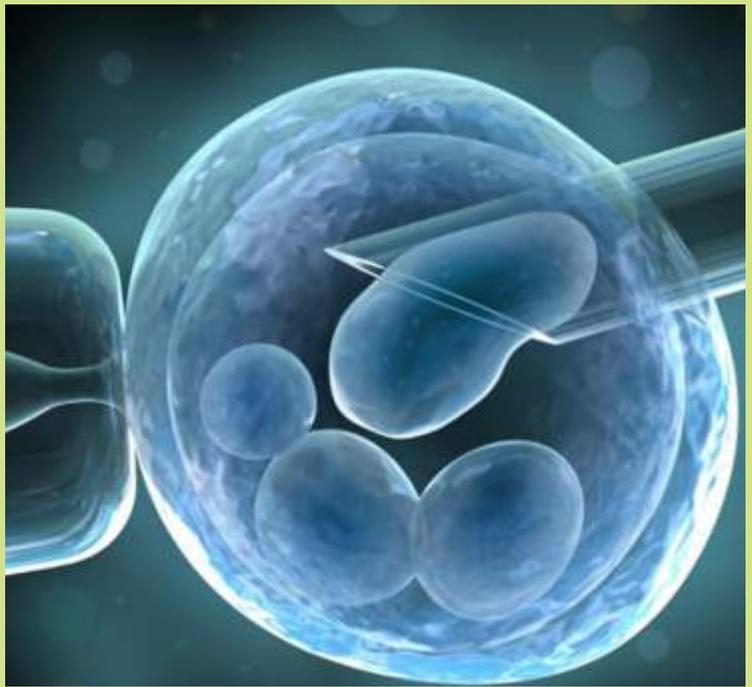
Year	Charitable Hospital	Non Government Hospitals	Government Hospitals
2018-2019	2,466	1,970	3,140
2017-2018	2,456	1,672	2,236
2012-2017	2,3385	15,510	16,531

Blood Transfusion

Year	Transfusion Management	Thalassaemia	Leukaemia	Haematological and other blood disorders
2018-2019	7,576	1,995	2,476	3,105
2017-2018	6,364	1,890	2,327	2,147
2012-2017	55,453	14,017	16,211	25,225

Research Priority: Stem Cells and Cancer

Stem cells are essential for maintaining and repairing regenerative tissues. However, genetic alterations of stem cells can lead to the generation of “cancer stem cells” (CSCs) that drive tumorigenesis and metastasis. Starting with mouse models, we would like to develop our research team to do the analysis of primary patient samples (blood, bone marrow, and tumour/ metastasis samples) and link the results to clinical parameters with the goal to develop innovative strategies to detect and target cancer and metastatic stem cells and break therapy resistance. We are interested to unravel the molecular and cellular basis of hematopoietic stem cell (HSC) and embryonic stem cell (ESC) self-renewal.



Professional Education Fellowship

The objective of fellowship programme is to develop the competency of young professionals engaged in transfusion medicine, oncology, blood banking, nursing care and oncology social work.



Transfusion Medicine Fellowship Programme

Transfusion Medicine Fellowship Programme (six months) is designed to train physicians interested in acquiring the competence necessary for rendering professional services in blood banking, transfusion medicine, immune-haematology, hospital transfusion service, therapeutic apheresis, coagulation and research.

Oncology Social Work

The association offers fellowship (six months) to postgraduate students perusing medical social work or general social work who have interest in counselling interventions; patient education; and mobilisation of community resources to facilitate patient and family adjustment to the diagnosis and treatment of the disease; to promote psychosocial recovery and rehabilitation for both patient and family; and to facilitate utilisation of health-care resources.

Summer Undergraduate Research Fellowship

The association continues to collaborate with academic and research institutes for engagement of students (medicine/ science and technology graduate) in reach and extension education programme through summer fellowship initiative. Through fellowship, students are encouraged to focus on technology research in the field of blood product development, therapeutic procedures and treatment protocol both in haemato-oncology and transfusion medicine.

Spirit of Partnership (Sponsorship and Grant)

Support from well-wishers, Chief Minister's Relief Fund, Governor's Relief Fund and CSR contribution of many corporates has been of great help in rendering medical services to children suffering from blood cancer and blood disorders in particular and

larger amount of patients requiring voluntary blood banking services in general. Joint initiative by the association and sponsors reflect that; efficient, well-organised and well-supported health services can be life-saving and life-changing.

Life in a Slum

The story of Kabita Mondal

Semi clad infants scampering away from the tracks into their shanty homes, women quickly removing clothes and utensils they lay on the railway line for sun-drying, nervy animals giving way to the oncoming local train bursting with humanity are part of the daily sights and sounds in the Dhakuria railway line slum area.

The metallic clanging of a gargantuan locomotive rhythmically trudging on glistening steel tracks, cutting through this constantly morphing urban slum creates quiet a disturbing ruckus several times during a day. Residence here though illegal is politically tolerated. Daily feuds with neighbours for water, electricity, food or simply space shatters many a nerve. Social evils, theft, bad company, communicable diseases and urban disaster such as fires are omnipresent. Life here can be quiet challenging for even the strongest amongst us.

Amidst such a chaotic environment, stands out a family of four. The Mondal's who have been living here for the last twenty two years are a true story of human triumph over hopelessness. More than two decades ago when Kalidas brought home Bithika, his newly wedded wife, friends and family gathered in much celebration, sounding conch and sprinkling marigold petals to welcome the beautiful bride in to this slum community.

Young Kalidas and Bithika started their life with much hope that someday they would escape this place for a better adobe, somewhere much pleasant and certainly better secured. The birth of their first child,

Treatment Support:



आई एफ सी आई सोशल फाउंडेशन



a daughter lovingly named 'Kabita' meaning poetry, brought great joy and reassured their dreams for a better future. Unfortunately life had a much darker secret to reveal, that would change their existence overnight.

The word 'Thalassaemia' was etched on the skin of their lives for the very first time. At seven months of age toddler Kabita was diagnosed with the disease. To, much social shame both Kalidas and Bithika were identified as carriers of the sickness. Apart from the ordeal of running from pillar to post trying to learn and deal with the ailment, the young couple faced much hostility from other family members, friends and neighbours. Some were sympathetic, but hardly any really helpful. The same people who had welcomed Bithika with garlands into the community now alienated her with scorn and disgust.

After a great deal of running around to avail the first blood transfusion for their daughter, the couple was fortunate to have somehow come and meet the late Dr. Dilip Bhattacharjee at IABCD. Reflecting back on the initial days of interaction with Dr. Bhattacharjee, Kabita's mother Bithika says that the doctor had much wisely counselled them. He had given them hope and convinced them that with regular blood transfusions and proper medication it was absolutely possible for her daughter to lead a normal life. Without this constant counselling from IABCD, Bithika says that they would not have been able to achieve all the success they enjoy today.

Yes, the success of Kalidas sustainably running a small, rice wholesale distribution shop. The success of Kabita pursuing 3rd year graduation degree on Human Development from the Calcutta University. The success of Kabita kindling a relentless spirit of trying out new things and all kinds of jobs, never saying no to any challenge. The success of Kalidas and Bithika giving birth to a completely healthy second daughter Bhumika, whose multi-talents include playing water polo, practicing karate and art.

Today Kabita has been coming to IABCD for blood transfusions for more than two decades. Presently requiring up to three transfusions per month. The doctors, nurses and staff are not merely quality service providers to her, but like family members. Kabita's father is really thankful to IFCI Social Foundation for sponsoring his daughter's treatment at IABCD. He wishes to spread more awareness about this disease so that many similarly suffering families muster greater courage and hope. So that the taboo and stigma related to the disease may lessen and finally so that medical technology may advance to provide better treatment.

Though today, Kalidas and Bithika along with their daughters Kabita and Bhumaki still reside in the same slum facing their share of daily challenges, their lives have certainly bettered. They have become a family who raises their head much higher than the challenges that surrounds them.

I am a Star

The story of Aditi Sarkar

Treatment Support:



F FOUNDATION

The glitz and glam of the cine world influences many a tender mind. Many of us as children, dream of becoming a movie star, or a singing sensation, or a dance prodigy when we grow up. The flickering celebrities on our portable TV sets and large celluloid screens of the multiplexes become our idols many a times, much before anyone or anything else.

Sixteen year old Aditi Sarkar, has nurtured such a desire, from ever since she can remember. Her passion is for acting and dancing. Like many other children of her age in India, she too is mad about

'dance talent shows' and the movies. She strongly believes that one day she would carve out a recognisable name of her own through a successful career as a renowned actor and choreographer.

Nothing wrong with such an innocent dream, other than even considering this a possibility while having to replenish the blood flowing through one's veins three times a month. Aditi's strong will and 'full of life' attitude has helped her seriously focus on a career in acting and dancing, while constantly fighting with the disease 'Thalassemia', every day of her life.

Aditi's story began on the 26th of August in 2003, when she came into existence as the first daughter of a simple mason Amar and his wife Gita, residents of Rajarhat village in the north eastern outskirts of Kolkata. Joy filled their lives as Aditi laughed and played in her parent's arms. Things however took an unexpected turn when at six months of age, infant Aditi fell severely ill, being diagnosed with Thalassaemia.

The barely literate rural community and family surrounding the couple were quick to curse and scorn Gita for bringing this disease amidst them. She spent many a nights sobbing in much anguish, clutching young Aditi in her arms, while Amar many a times just stayed out, unable to cope with the pressure. Running around for blood just after detection of the disease turned out to be a hellish challenge for the couple. They were unable to get much or any sound advice from anyone. Amar went on days end without earning a single rupee, as he had to run around for his daughter's treatment rather than engaging in mason work, which was already seasonal in nature.

To much relief, an acquaintance of Amar, informed him about IABCD, and how his daughter could receive quality blood and Thalassaemic treatment at much subsidised rate at the centre. Amar and Gita brought Aditi for a transfusion at the clinic for the first time at one years of age. Fifteen years have passed since then. Aditi has grown from a little

toddler to a vibrant teenager. Their family and community situation has become much better. People around them are now more aware of the disease. Amar and Gita now have a second daughter, who is not affected by the disease, and leads a very healthy and normal life.

Though financially not very stable, yet the family is much relieved for their daughter's treatment being sponsored by the 'Blue Star Foundation'. Mother Gita, expresses much gratitude to IABCD for rescuing their lives from certain demise. Father Amar is a happier man, being able to concentrate more on his work, having not to worry about his daughter's treatment. Aditi just recently appeared for her standard X Madhyamik examination from the Narayanpur Vivekananda Vidyalaya and is awaiting for her results. She practices her dance routines and acting scripts daily, shouting out to her lungs content "I am a Star".



Support Required: Blood Cancer Life Services

Your partnership and participation in the association is for all blood cancer patients, and are saving lives not someday, but today.

Equipment and infrastructure support	Quantity	Amount in INR
Elisa reader and washer	1	34,80,000
Lab Work Station - Gel Technology (Incubator and Centrifuge)	1	5,25,000
Computer with printer	3	2,40,000
Mobile medical van	1	13,50,000
Tube sealer	1	2,00,000
Portable tube sealer	4	7,20,000
Blood weighing scale	1	60,000
Air conditioners	10	3,50,000
Refrigerated centrifuge	1	37,00,000
Multi pipette	4	1,60,000
Photocopier	1	2,00,000
Laminar airflow	1	3,00,000
Deep freezer (-80°C)	1	11,00,000
Deep freezer (-40°C)	1	9,00,000
Patient bed	7	3,50,000
Sterile connecting device	1	8,50,000
Blood component extractor	1	22,40,000
Haematology cell counter	1	8,75,000
Total		1,76,00,000



We Need Your Support:

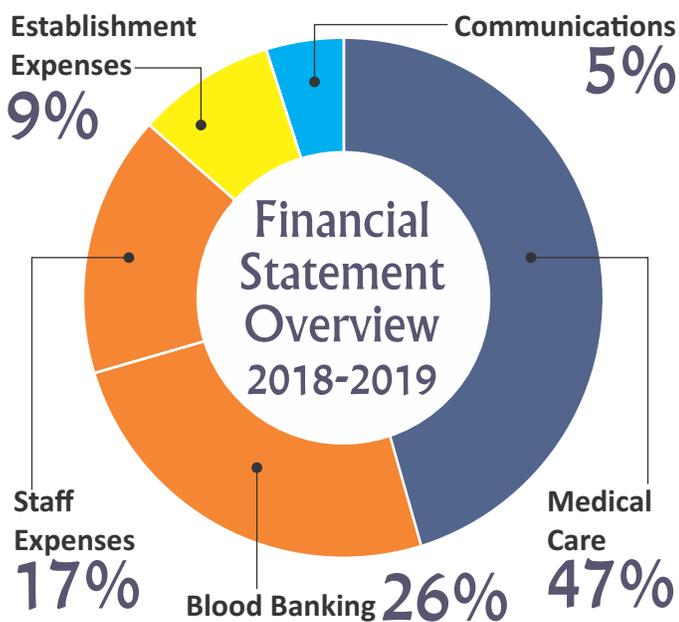
The way you can help us for providing quality care

Particulars	Service Type	Amount in INR
Patient care- Medical Services	Blood Transfusion Services for one year (12 times)	30,600
Blood Transfusion	Cost of one unit blood transfusion	2,550
Iron chelation therapy	Cost of therapy per patient	5,000
Voluntary Blood Donation	Motivation & collection 50 donors	12,500
Education – Transfusion Medicine	Fellowship per participant for six months	3,00,000
Oncology Social work	Fellowship per participant for six months	1,80,000
Summer training – Research fellowship	Fellowship per participant for three months	90,000



Financial Governance and Statements

IABCD is committed to conducting all activities and services in compliance with all applicable laws, rules, and regulations, and in accordance with the highest standards of business ethics and compliance. Our actions must consistently demonstrate that we fairly and honestly deal with our colleagues, clients, collaborators, vendors, and beneficiaries. Our accounts are audited by external auditors and follow the rules and regulations of prescribed tax authority.



Ethics, Integrity and Compliance

Ethics, integrity, and compliance are fundamental values at the core of how IABCD interacts with patients, partners, employees, donors and vendors across the region. These values are embodied in IABCD's 'Ethics and Compliance Guideline', which is affirmed by IABCD's Board of Directors, and applied across the entire organisation. IABCD's 'Ethics and Compliance Committee' team leader oversees the Ethics and Compliance programme, promotes a culture of compliance through training and regular

communication on important topics, and works with IABCD management to establish, monitor, and enforce standards, policies, and procedures to identify and prevent illegal, unethical, or improper conduct.

Auditor

Sri. Ritesh Agarwala – FCA, Chartered Accountant, Kolkata

Banker

1. Bank of Baroda, Beliaghata Branch, Kolkata,
2. State Bank of India, Phoolbagan Branch, Kolkata,
3. State Bank of India, Salt Lake Sector-III Branch, Kolkata
4. Indusind Bank, Kankurgachi Branch, Kolkata

The Team

1. Dr. Asok Sarkar – Medical Director
2. Dr. Sourav Ghosh – Medical Director
3. Dr. (Mrs.) Kakali Bhowmik
4. Dr. (Mrs.) Reshmi Kundu
5. Alok Dhara
6. Arindam Biswas
7. Arunima Chowdhury
8. Ashim Kumar Bhattacharjee
9. Bhola Jha
10. Bijoy Mondal
11. Joydeep Mondal
12. Kapil Kanta Das
13. Krishna Prasad Sahoo
14. Mitali Samanta
15. Monali Ghosh
16. Mousami Mate
17. Niloy Banerjee
18. Pitambar Khamaru
19. Putul Nag
20. Raghunath Yadav
21. Rituparna Banerjee
22. Subhankar Barik
23. Swati Chatterjee Sen
24. Mouli Pal – Volunteer, Honorary Project Development Associate



Board of Directors

1. Sri. Adil Firoze, Engineer – Honorary Member, Management Specialist, New Delhi
2. Sri. Alope S. Gupta – Economist, Member & Honorary Secretary, Kolkata
3. Sri. Amalendu Pal – Social Work, Member & Honorary President, Kolkata
4. Sri. Anjan Sarkar – Service, Honorary Member, Kolkata
5. Dr. Asok Sarkar – Member (Invitee), Medical Director, Kolkata
6. Sri. Atma Prakash – Financial Consultant, Honorary Member, New Delhi
7. Sri. Madhab Banerjee – Honorary Member, Kolkata
8. Dr. Manju Datta Chaudhuri – Medical Advisor – Haematologist, Kolkata
9. Sri. Prasanta Das – Retired Banker, Honorary Member, Bhubaneswar
10. Sri. Rohit Pal – Honorary Member, Strategy and Investment, New Delhi
11. Sri. Sandip Samajdar – Engineer, Corporate Social Responsibility, New Delhi
12. Dr. Sourav Ghosh – Member (Invitee), Medical Director, Kolkata
13. Sri. Subhendu Albert Rozario – Finance Specialist, Honorary Member, Kolkata
14. Sri. Tishikh Dasgupta – Communication & Creativity, Honorary Member, Kolkata
15. Sri. Yogesh Wardhani – Bio-Medical Engineer, Honorary Member, New Delhi

3. Bishamber Das Bimla Kapur Memorial Trust
4. Blue Star Foundation
5. Chief Minister's General Relief Fund, Government of West Bengal
6. Firoze A. Vakil
7. G. D. Pharmaceuticals Pvt. Ltd.
8. G. K. Khemka Memorial Clinic
9. Global Calcium Pvt. Ltd.
10. Harbhajan Singh
11. IFCI Social Foundation
12. J. K. Cement Nimbera Foundation
13. LIC Housing Finance Ltd.
14. Minakshi Foundation
15. Morarji Bhagwandas Shivji Sanatorium Trust
16. Pirojsha Godrej Foundation
17. Plasti Pigments Pvt. Ltd
18. Rupa & Company Ltd.
19. Sardar Chetan Singh Charitable Trust Ludhiana
20. SBI Life Insurance Co. Ltd.
21. Shri Dinesh Foundation
22. Sitaram Jindal Foundation
23. Sri Sri Thakur Sitaramdas Onkarnath Seva Foundation
24. Super Forgings & Steels Limited
25. Thaku Bhojwani Charitable Trust
26. Thanwala Consultancy Services
27. The Governor of West Bengal Welfare Relief Fund
28. The Sukriti Trust

Government Bodies

1. Govt. of West Bengal
2. Directorate of Drugs Control
3. C.D.S.C.O.-EZ-Govt. of India
4. State Blood Transfusion Council
5. Department of Social Welfare
6. West Bengal Pollution Control Board
7. WB State AIDS Prevention & Control Society
8. The Kolkata Municipal Corporation

Acknowledgements

Names of organisations/ trusts who have kindly contributed to IABCD for providing services to suffering humanity

1. Ashini Kumar Bajaj
2. Bhaskar Ghose

