

# **THALASSEMIA SOCIETY PUNE CHAPTER**

Registration No. 2057/2014

"Life has two rules: #1 Never quits #2 Always remember rule #1"

Newsletter Date-09-Sep-2023 Volume 1, Issue 6

#### "Our aim is Prevention of Thalassemia and the people in society should be educated about it".

#### Thalassemia - you can help.... prevent....

The Thalassemia Society Pune Chapter (TSPC) was founded by patients, parents and friends affected by Thalassemia Major. The foundation provides hope, comfort and encouragement to those battling this disorder. The foundation maintains a strong relationship with the medical community that provides diagnosis, treatment and care.

We at the Thalassemia Society are committed for Prevention and Awareness drives in and around Pune. We have set a goal to achieve ZERO Thalassemia birth of new Patients in Pune by the year 2030.



President Dr. Nita Munshi

As a part of this, we are planning to cover all corporates and colleges. We have conducted major awareness campaign in Infosys, Wipro, Fiat, VW, to name a few- where we have tested more than 5000 samples for Thalassemia Trait (carrier state) and counseled the Traits. We are in process of similar mass awareness campaign / screening for prevention in various communities to create awareness of the disease condition. We are also collaborating with like-minded organizations for awareness.

We help needy patients to ensure they are following effective treatment protocol to lead a perfect life. We have a lot of poor patients who can't afford treatment and it is our endeavor to ensure help to them to battle the disease.

We Organize blood donation drives to procure blood required for transfusion to maintain normal hemoglobin of the Thalassemia children.

We also arrange forums & get together of patients and Parents for the welfare & treatment updates and cascading screening for future prevention in their Families.

We require funds to manage all the activities we are doing and request your kind help to inspire us to do more and more in the Field of Thalassemia through our Thalassemia Society Pune Chapter (TSPC).

#### We have the 80G exemption certificate and the CSR registration for donations to our Society.

It is our earnest plea to request financial help in our noble cause and become our partners in PREVENTING Thalassemia in Pune.



**Thalassemia** is a treatable disorder that can be well-managed with blood transfusions and chelation therapy. A person with thalassemia will need to receive medical care on a regular basis from a hematologist or a doctor who specializes in treating patients with thalassemia.

These patients need you more than ever before. The economic conditions caused by the global pandemic have adversely affected Quality of care to our Thalassemia Warriors due to paucity of funds.

Secretary Surendra Sitani



## Thalassemia doesn't just impact the patient; it impacts everyone that knows them!



"Be Aware. Share. Care.: Working with the global community as one to improve thalassemia knowledge."

LET'S MAKE THIS WORLD THALASSEMIA FREE

#### Have you tested yourself for Thalassemia Minor?

There is nothing wrong in being a Thalassemia Minor. All you need to do is to get yourself and your partner tested for Thalassemia Trait/Carrier. If only one of the two partners is a Thalassemia Trait/Carrier, there is no risk to their future child.

Most people who are Thalassemia Minor do not know of it And, they come to know of it only after their child is born a Thalassemia Major By then, the harm is done.

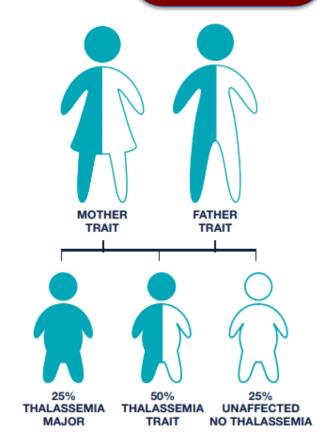
# How can one diagnose Thalassemia?

By blood tests:

- Routine (CBC)
- Special (Hb electrophoresis)
- Genetic studies

मूल तथ्य यह है कि अगर माता-पिता दोनों को भी कुछ हद तक थैलेसीमिया है तो बच्चा इसकी उच्च दर से प्रभावित हो सकता है। इसलिए मैं उन सभी नए युवा जोड़ों से आग्रह करता हूं जो बच्चे की योजना बना रहे हैं, वे पहले अपने खून की जांच कराएं। - जैकी श्रॉफ





Prevention of Thalassemia - A Major task on Hand And everyone should be a brand ambassador for Thalassemia so that everyone is aware of it. - Jackie Shroff

# Awareness and Prevention of Thalassemia and Hemoglobinopathies - Dr. Nita Munshi

Have you got your pre-marital test done? What's that? asked a friend ... well that's exactly what the TSPC (Thalassemia Society Pune Chapter) along with MMF (Mukul Madhav Foundation) are aiming for..... Creating awareness among the General Public about Thalassemia and Haemoglobinopathies (Hereditary Blood disorders).

There are many Hereditary Blood disorders, but Thalassemia is one which is still prevalent in India in large numbers. We have about 10,000 children born every year even today in India. Despite our country's progress by leaps and bounds on all other fronts, this is one area which needs to be addressed. And it's sad that there is so much ignorance all around about this subject matter. Thalassemia is a genetic hereditary disorder which causes physical, financial, emotional, psychological, and social drain on not only the person affected but the entire family!

TSPC and MMF have started awareness drives in various colleges. We give a talk on what is Thalassemia.... the Facts and Myths about the disorder, the problems faced by the persons affected and what should be done to Prevent the numbers from increasing. The thrust is on testing all people before marriage, and both partners. The test is HB electrophoresis, a special test along with CBC (Complete blood count)- both being blood tests totally free of cost.

This test picks up any Hemoglobinopathy. We offer the test to all students; and though voluntary, all students do give their blood sample. Once the test is done, all positive persons who have Thalassemia Trait / Minor are counselled by the team of doctors. We offer testing for the entire family too. We explain the effects of the condition, what to do and what NOT to do, the future course etc. There is NO treatment for Minors. However, it is important for the carrier to understand the condition in detail. 2023 we have tested approximately over 1200 students in 8-10 colleges. The incidence of Thalassemia Minor is 3-5% on an average.

Over the past 5 years, TSPC has tested and given talks to over 5000 people (students and corporates).

#### Our Dream & Aim is to Create mass awareness about Thalassemia, and Target

#### Thalassemia Mukt Pune by 2030

#### Thalassemia Mukt Maharashtra by 2035

#### Thalassemia Mukt BHARAT by 2040.

The Government of India has declared in the last Budget meeting that they are now going to test all pregnant females in the first Ante natal visit or in the first trimester. This will help achieve our dream. We are ready to join hands with the Govt of Maharashtra and India in doing the special test in pregnant females at subsidized cost. This is the real challenge in our country but with the help of the Government, I am sure we will achieve our goal. I pray that all who read this, help us in our endeavor to spread awareness and prevent this disorder which is preventable.

Do feel free to contact us for any details.



"Life is not easy for any of us. But what of that? We must have perseverance and, above all, confidence in ourselves. We must believe that we are gifted for something, and that this thing, at whatever cost, must be attained."

# National C3 Thalassemia Conference Pune – 13<sup>th</sup> November 2022



C3- Care- Cure- Curb Thalassemia BY

Thalassemia Society Pune Chapter and Rudhir- The Lifeline Comprehensive Daycare



Care- Thalassemia bachcho ki dekhbaal kaise ki jaiye Cure- Thalassemia se bachcho ko kaise mukt kiya jaiye Curb- Thalassemia mukt Bharat ki aur kadam kaise badhaya jaiye

## **Conference Overview:**

The National C3 Thalassemia Conference 2023, held on November 13<sup>th</sup>, 2022, at Pune, brought together a diverse community of thalassemia experts, researchers, healthcare professionals, patients, and advocates. The conference aimed to promote knowledge sharing, collaboration, and innovation in the field of thalassemia research and patient care.

# Key Highlights:

- Opening Ceremony: The conference began with an inspiring opening ceremony featuring speeches by renowned personalities who are experts on the subject and dedicated to the Cause of Thalassemia- Dr Vinita Srivastava, then Ministry of Tribal Affairs, Govt. Of India; Dr. Nitin Ambardekar, then Commissioner Pune Corporation and Deputy Director Health Services, Govt. of Maharashtra; Mrs. Shobha Tuli, President Federation of Indian Thalassemic and Vice President, Thalassemia International Federation ; Dr J.S. Arora, Secretary, Federation of Indian Thalassemic; Thalassemia experts and patient advocates. Distinguished keynote speakers presented on a range of topics, including recent advances in gene therapy, new medications, the global impact of thalassemia, and patient-centric care. These talks set the stage for the conference's discussions and sessions.
- Hematological Advances: Leading hematologists presented the latest research findings and clinical advancements in the field thalassemia.
- Research Advancements: The conference featured numerous presentations and posters showcasing the latest research findings in thalassemia. Topics covered genetics, treatment modalities, emerging therapies, and the psychosocial aspects of living with thalassemia.
- Transfusion Medicine: Discussions centered on best practices in transfusion medicine, blood banking, and the safety and quality of blood products. The conference explored innovations in blood component preparation and storage.
- Patient-Centered Care: Sessions dedicated to patient perspectives emphasized the importance of holistic care, including mental health support, genetic counseling, and patient advocacy. Personal stories highlighted the challenges and triumphs of individuals living with thalassemia.
- Health Initiatives: A discussion addressed the global burden of thalassemia and efforts to improve access to quality care, particularly in regions with limited resources.
- Networking and Collaboration: Attendees had ample opportunities to connect and collaborate with peers and experts. Networking events and interactive workshops facilitated knowledge exchange and partnership building.







# With thalassemia, you can't afford to wait for your heart to tell you it has too much iron.

ET US PREVENT THALASSEML

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& Rudhir - The Lifeline

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THALASSEMI

CONFERENCE

2022

Jankalyan Raktapedhi Nagar 🧼 😽 😽

Excellent conference was organised in Pune. The work done by the Thalasemic society is too good. Heartiest congratulations to all the organising committee....













Save your CHILD from Life Long Blood Transfusion - "Get Tested for Thalassemia"

# Everyday Lessons from Thalassemia - Dr. Liza Bulsara - Consultant - Pediatric Hematologist Oncologist

Thalassemia is a Genetic & Preventable disorder. India is the thalassemia **CAPITAL** of the world. There are 6 crores of thalassemic carriers in the country (1/4th of our population). The lack of awareness and acceptance of the prevalence of disease is the society – is our BIGGEST Hurdle. Today- I am not gone talk about how? why? Regarding thalassemia. Today, we are going to talk about how warriors have taught me valuable lessons of life.

Every warrior – with every transfusion has taught me that whatever is situation we are in **There is always a reason to smile**. I have seen warriors getting pricked multiple times sometimes and consoling the nurse that "It Happens, sister. See, there is a vein here" They look at positive aspect of everything. Blood shortage – they make appeal for themselves, and everyone need. Be any problem, they have a solution with a smile. **Warriors NEVER take anything for granted** – they simply express gratitude in their own simpler way for every minuscule I thing in the world. The only demand from their side is to be treated with Respect." How are we Different?" is the question usually asked. Their gratitude extends from a pretty smile to the blood donor who has given them life for 21



Thalassemia warrior- By Nitesh Pahuja



Dr. Liza Bulsara Consultant - Pediatric Hematologist Oncologist

Rudhir – The lifeline Comprehensive Daycare & Anandrishiji Thalassemia Daycare. I have learned that even if you face the same problem everyday – you should face with firmness and fight it – learned to deal with it in your unique way. Every warrior from the time they start understanding the worldliness-they have explored the diagnosis of thalassemia. Every day from age of 6 months- they have lived – faced – fought Thalassemia. Sometimes – even with physical atrocities and mental fatigue, they unfold their wings of strength and hope. Fighting the same thing every second, minute with every cell of your existence and not letting it empower you – lesson learnt from a warrior.

**Patience is a virtue.** No one can prove it better than a thalassemia warrior. The wait for a blood bag after giving sample. The hopeful wait for serum ferritin to come down with strict adherence to treatment schedule. making every effort – to increase weight & height, maintaining Hb > 9.5 g% and annual list of several medical test.

**Be a Rebel.** My Warriors were born in 80-90s. when they were born, most renowned doctors told their parents (who do not even know how to spell THa-la-sse-mia) that leave child alone and they won't live more than 5-6 years.

But, my rebels chose their own path and carved it. They lived and now they are the inspiration to million others. Few are doctors, CAs, Lawyers, MBAians, Entrepreneurs, Actors – leading the torch of inspiration wherever they go.

This Thalassemia Day- I just want to thank each warrior whose path i have crossed in person or virtually.

Thank you for teaching me patience.

Thank you for teaching me how to smile in every situation.

Thank you for teaching me not to take anything for granted.

Thank you for making me stronger than my fears.

Thank you for teaching me the tactic to fight the same problem again and again.

Thank you for teaching me not to get frustrated – as that's not even an option.

Thank you for making me realize – you can make your own mark with what you are.

I would not be the person I am today, if in this journey – I wouldn't have met you.

Be part of the International Thalassemia Day 2022 and help transform the lives of millions of people across the globe!

#### Living with thalassemia major, he now plays saviour, says early screening can prevent the disorder in newborns

He didn't choose to be born the way he did. Or want inheritance. His parents didn't either. They waited to hold a healthy baby in their arms and complete their circle of life, not knowing that they carried the illness that they had unknowingly passed on to their son. And so, the one thing that 42-year-old Jatin Sejpal, who has been living with the genetic blood disorder called thalassemia major since birth, has learnt is patience. Endless hours of it. As he calms down anxious relatives of ICU patients at his coffee station on the fifth floor of Pune's KEM Hospital, he's a living lesson of how life can be reclaimed even when it seems to be breaking down. And he may have chosen not to have a child, but he helps other children and their parents by spreading awareness about the disease, having built an encyclopedic knowledge through his lived experiences.

"Around 10,000 children with thalassemia major are born every year in India. It affects all organs of the body. It starts with the bone marrow being unable to produce adequate hemoglobin. The liver and spleen are also under pressure and overworked. Due to repeated blood transfusions and iron overload, the thyroid, pancreas and the pituitary gland malfunction and require specific medication to treat each of them. Sometimes thalassemic experience facial bone deformities. A transfusion, while life-saving, has to be watched as excessive iron-buildup can be life-threatening, affecting major organs," says Dr Nita Munshi, president, Thalassemia Society Pune Chapter.

"Nobody knew much about thalassemia when I was born in 1980. Certainly, my parents didn't know they were carriers," says Jatin for whom life, as he remembers as a child, was about blood transfusion every fortnight followed by iron chelation injections to rid the body of excess iron. It was at KEM Hospital that noted pediatrician Dr Anand Pandit diagnosed his condition when he turned two. Looking back, Jatin is grateful that he did not pick up any infection following his many blood transfusions but admits that arranging blood was a challenge for his parents. Each transfusion meant almost two days of rashes, fever and weakness. As a child, he required a 250 ml pouch of blood which then increased to 400 ml as he grew older. "The injections to remove excess iron were costly, each vial costing Rs 160 back then. Two vials had to be administered via an infusion pump though my father could not afford the Desferal injection. I took shots at least twice a week or so. The infusion pump helps deliver a specific and continuous amount of the medicine subcutaneously. The infusion set has to be inserted under the skin and connected to the pump and has to be given over 8-12 hours," says Jatin.

Despite the challenges and hardships faced by me and my family - today I am independent and run a tea / coffee stall outside the ICU of KEM hospital, Pune. I am married to another Thalassemia Major girl and work for the cause of Thalassemic as a Counsellor trying to do my bit for society. My contact no is: 9822592370. Please feel free to contact me for any issue related to Thalassemia.



Jatin Sejpal

https://indianexpress.com/article/lifestyle/health-specials/living-with-thalassemia-major-early-screening-can-prevent-disorder-newborns-jatin-sejpal-8382119/

The only people that are making a difference are those who volunteer.

# 8<sup>th</sup> May - World Thalassemia Day – Give Blood, Give Life

Every year 8th May is celebrated as World / International Thalassemia Day. The theme of this year 2023 was "Be aware, share, care – Strengthening Education to bridge the thalassemia care gap." This theme enables us to educate and spread awareness amongst society about thalassemia and measures to prevent this disease. There are 270 million thalassemia patients in this world. INDIA has highest number of thalassemia patient in the world! Very Sad state ......India has 1-1.5 lakh patients and approximately 10000-150000 children are born each year with Thalassemia Major.

# What is Thalassemia?

Thalassemia is genetic disorder which causes ineffective erythropoiesis; meaning body produces an inadequate amount of hemoglobin. Hemoglobin is a protein molecule that has oxygen in the red blood cells. It results in the extreme destruction of red blood cells that leads to anemia. Anemia is a condition in which the hemoglobin or red blood cells are less than normal for age. There are three types of thalassemia — Minor, Major and Intermedia. A person with Thalassemia major suffers from the disease throughout his life while a person with thalassemia minor / carrier / Trait leads a normal life but can pass on the disease to his or her child. When two Thalassemia carriers marry, then in every pregnancy there will be 25% chance of Thalassemia Major Child, 25% of normal healthy child and 50% of Thalassemia carrier.

What are Signs/ Symptoms? There are several types of thalassemia. The signs and symptoms you have depend on the type and severity of your condition. Thalassemia signs and symptoms can include:

- > Fatigue
- > Weakness
- > Pale or yellowish skin
- Facial bone deformities
- Slow growth
- Abdominal swelling
- > Dark urine

Some babies show signs and symptoms of thalassemia around 4-6 months of age; others develop them during the first two years of life.

**Diagnosis:** If you have Thalassemia minor then no symptoms, Thalassemia Major causes more severe symptoms that can be found earlier in life, usually before a child is 2 years old. To determine whether you or your partner or child have Thalassemia, your provider may ask about your risk factors, including your family's and your medical history. Your provider might also order blood or genetic tests.

#### Blood and genetic tests

Your provider may order the following tests to determine whether you or your child have thalassemia Major or Minor:

- Complete blood count (CBC)
- Special test HB Electrophoresis.
- > Genetic testing can help determine what specific type of thalassemia you have.

Earlier it was more likely to have thalassemia based on your family history and genetics and your race or ethnicity. If your parents have mutations in the alpha globin or beta globin genes, or in other genes that affect the alpha or beta globin protein chains, then you can inherit thalassemia. If someone in your family has thalassemia, you may be a carrier. Carriers can pass the condition on to their children.

## Family history and genetics

If your parents have mutations in the alpha globin or beta globin genes, or in other genes that affect the alpha or beta globin protein chains, then you can inherit thalassemia. If someone in your family has thalassemia, you may be a carrier. Carriers can pass the condition on to their children.

# Race or ethnicity:

Earlier it was certain caste which has high prevalence of thalassemia but due to urbanization and globalization – its widespread beyond any boundaries.

## How is thalassemia treated?

Treatment for thalassemia depends on the type of Thalassemia.

- > Thalassemia Minor NO Treatment
- Thalassemia Major Moderate to serious anemia symptoms as described above. Blood transfusions every 2-3 weeks, Medicines for reducing the iron overload or a Bone marrow transplant with a matched sibling.

## **Blood transfusions**

Blood transfusions every 2-3 weeks are the main way to treat moderate or severe thalassemia. This treatment gives red blood cells healthy hemoglobin. During a blood transfusion, a needle is inserted, and intravenous (IV) line started into one of the blood vessels. One or two bags of blood are transfused through this line. The procedure usually takes 1 to 4 hours per bag. How often blood transfusions are needed depends on the level of Hemoglobin and the age of the child / weight of the child.

Occasional blood transfusions may be needed for people who have hemoglobin H disease or beta thalassemia intermedia. Specifically, a transfusion may be needed when your body is under stress, such as during an infection, pregnancy, or surgery.

#### Iron chelation therapy

The hemoglobin in red blood cells is an iron-rich protein. Regular blood transfusions cause iron buildup, or iron overload, which can lead to potentially life-threatening complications. To prevent this, doctors use iron chelation therapy in people who receive regular blood transfusions to remove excess iron from the body. A proper treatment in a child can cost up to 2,00,000 rupees per annum and a curative approach Bone Marrow transplant can cost up to 10-15 lacs.

#### Can thalassemia be prevented? => Yes

People who do not know whether they carry a faulty gene that can cause thalassemia can ask their healthcare provider for a blood test. Couples who are planning to have children may want to meet with a genetic counselor. A genetic counselor can answer questions about the risk and explain the choices that are available. If you are pregnant and you or your partner has a family history of thalassemia, the health care provider may also recommend prenatal testing. Prenatal testing is done using a sample of amniotic fluid - the liquid in the sac surrounding a growing embryo, or of tissue taken from the placenta, the organ that attaches the umbilical cord to the mother's womb. Testing before birth is safe and can be done as early as 10-12 weeks into the pregnancy.







#### **Testing For Thalassemia**

# A SIMPLE Blood Test called Hb ELECTOPHORESIS / Hb A2 will tell you whether you are a carrier (have a trait) of thalassemia minor.

**TSPC Patient Welfare** is committed to look after wellbeing of Thalassemia Patients and Family members. We at TSPC are super focused to enhance quality of life of our patients by driving many initiatives related to Awareness, Counseling, by Jatin Sejpal - 9822592370, Annual health checkup programs, subsidized rate Leukocyte reduction Filters, Medicines reimbursement to needy patients. TSPC Welfare committee is driven by passionate members of TSPC who Thalassemia Patients and Parents are. We have members like Mr. Nilesh Shah, Mrs. Naina Doshi, and Mr. Jatin Sejpal actively working for TSPC Welfare committee. We are well guided by our team members including our President, Dr. Nita Munshi. We are also well supported by Mrs. Priti Kulkarni for our digital marketing like posters, WhatsApp graphics, standees, and booklets.

#### Here are some highlights of TSPC Welfare committee:

**Leukocyte Filters:** TSPC continues to provide Leukocyte Filters to our patients who need blood transfusions. We have provided an average monthly 90 filters to various patients at subsidized rates. Patients are connecting with our TSPC office and collecting these filters as per requirement.

**Medicine Reimbursement:** TSPC is very happy to share that we provide financial help to more than 45 patients. Patients get their Thalassemia related medicine cost reimbursed from our office. We have identified these patients based on their family needs and using stringent criteria.

**Patient Medical Discount Program:** A Thalassemia patient, has huge recurring expenses on medicines like iron chelation. TSPC stepped forward to help and provide financial relief to our patients. We leveraged our relationship with 2 of the medical stores who have been involved for many years to help Thalassemia patients. TSPC has worked on special discounts on most used Thalassemia medicines. Discounts vary according to the medicines. We launched a discount program in September 2021. We have received very positive responses from our patients, and they are saving high amounts with quality & timely medicine availability at these medical shops.

#### **Medical Shops:**

- > Prakash Medical Centre, Opposite Railway Station, Pune -01. Ph: +91 9112111847
- > Kalyani Medicals, Opposite Ruby Hall Clinic, Pune-01. Ph: +91 9049952598

#### How to avail benefits:

- 1. Patient to visit TSPC office; carry original medicine prescription & amp; TSPC Card
- 2. Carry 2 Xerox copies of medicine prescriptions as you visit TSPC office
- 3. Medicine Prescription can be maximum 3 months old
- 4. Collect stamped prescription Xerox and visit medical shop
- 5. Show stamped prescription and pay discounted money to Medical shop
- 6. Collect Medicines and Bill

Please note medicines will not be provided at a special discount rate unless your prescription has TSPC stamp, date and signature





"Challenges are what make life interesting and overcoming them is what makes life meaningful."

We are grateful to Mrs Ritu Chhabria and MMF for taking care of thalassemia children for their medications.



Our association with Mukul Madhav Foundation (MMF) began almost 4 years back when they came forward to help our Thalassemia major children. The journey has since been very positive.

Ours is a Society- an NGO – comprising of parents who have children or patients suffering from Thalassemia Major – a genetic disorder which requires the child to have regular blood transfusions for Life just to survive; and take expensive medicines.

MMF started Helping with medicines for a few patients, which has now expanded to helping 29 patients.

Awareness and Prevention of Thalassemia program in colleges across Pune has been initiated solely by the MMF team under the Able, Compassionate and Dedicated leadership of Mrs. Ritu Chhabria – who is a Visionary and focused on her Charitable work. We have so far screened and tested is approximately over 1200 students.

We pray that this association will get stronger over the years with 2 Goals:

- 1. Easing the burden of more and more Thalassemia Major children and bringing a smile to their faces
- 2. Preventing the Birth of a Thalassemia Major Child in and around Pune in the future.

God Bless Mrs. Ritu Chhabria and the MMF Team and Heartiest Congratulations for completing 25years of excellent Charitable work in various fields of Education, Health Care, Uplifting the Quality of Life in Rural India and many more projects. Pray that you have the Blessings of the Almighty for such wonderful work, so we celebrate 50 years and more.

Dr. Nita Munshi President Thalassemia Society Pune Chapter Did you know that beta thalassemia major is the most severe form of thalassemia? By staying committed to long-term treatment, people with thalassemia can enjoy a full life.



TSPC play a crucial role in supporting individuals with thalassemia and their families. Offer emotional and practical support to patients and their families. This includes providing information about the condition, treatment options, and managing daily challenges associated with thalassemia. TSPC play a critical role in improving the lives of individuals affected by thalassemia and working toward a better future for those with this condition.



In loving memory of Rita Madam, we offer our heartfelt "Shraddhanjali." Her presence and contributions will forever be etched in our hearts and the annals of our organization's history. Let us remember her with gratitude and reverence for the indelible mark she left on all of us. May her soul find eternal peace and rest in the warm embrace of our fond memories.

Tough Times Never Last but Tough People Do! Stay Positive.....



Dear Mrs. Jasmine Majethia Madam,

Congratulations on Your Well-Deserved Award!

We are thrilled to extend our warmest congratulations to you on receiving the Iron Lady award On International women's day for your exceptional dedication and unwavering support to thalassemia patients and their families.

Your commitment to improving the lives of those affected by thalassemia has not only made a significant impact on individuals but has also inspired and touched the hearts of many. Your tireless efforts in supporting Thalassemia Patient have truly made a difference.

This recognition is a testament to your compassion, advocacy, and the positive change you have brought to the thalassemia community. It is a well-deserved honor that acknowledges your outstanding contributions.

As you continue your remarkable journey in supporting thalassemia patients, please know that you have our deepest respect and gratitude. Your work is an inspiration to us all, and we are proud to stand alongside you in the pursuit of a brighter, healthier future for those living with thalassemia.

Once again, congratulations on this prestigious award. May it serve as a reminder of the incredible impact you have made and continue to make in the lives of thalassemia patients.

Warm regards and heartfelt applause, **TSPC** 



# Patron

Mrs. Jasmine Majethia President Dr. Nita Munshi Vice President Mr. Ramesh Arora

Secretary Mr. Surendra Sitani Joint Secretary Mr. Kailas Tile

Treasurer Mr. Shrichand Tejwani Joint Treasurer Mr. Nilesh Shah

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Advisory Doctors

Dr Liza Bulsara Dr Sweta Lunkad Office Address

Madhav Department Stores, Tej couriers, 740 BudhwarPeth, GaneshRoadNr. Phadke Houd.Pune 411002

Mobile @ +91-844-671-6162 (Open from 10am-2pm)

Email -<u>thalassemiapune14@gmail.com</u>

We're on the Web! See us at: http://thalassemiapune.co.in We couldn't do what we do without our volunteers and donors. Together, we're making a difference – and you can, too. There are countless ways you can help us lead the fight against thalassemia.

# Association

Thalassemia International Federation (TIF) - <u>http://www.thalassaemia.org.cy/</u> National Thalassemia Welfare Society - <u>http://www.thalassemiaindia.org/</u> Thalassemics India - <u>http://www.thalassemicsindia.org/</u>

Maharashtra Blood Transfusion Council - http://mahasbtc.org/sbtc/

Big Thank You to all who help and support us. Together we are making a difference! Your continued support of our mission is deeply gratifying to us, and we hope it is the same for you. We would love the opportunity to thank you again!

# For Donation – Contact office or scan below QR code.



UPI ID: thalsoc@ucobank

# Patients/Parents/Associations/Doctors/Caregivers

Please share your valuable thoughts, suggestions, feedback, and comments if any on our official address or email.

Email - thalassemiapune14@gmail.com

About our Organization - Thalassemia Society Pune Chapter is a purely voluntary, social, welfare organization committed for the cause of Thalassemia. TSPC formed as a voluntary, social, welfare organization committed for the cause of Thalassemia Gene and 10,000 Thalassemia Major are born every year. Thalassemia can be prevented by awareness & screening before marriage or before planning for family. Survival depends upon life-long repeated blood transfusions and costly medicines. For Private Circulation Only

