



NEIADVL NEWSLETTER

Volume: XXXI • December 2025

Official Mouthpiece of N. E. States Branch of IADVL

CONTENTS

	Pg No.
From the Editor's Desk	01
Message from President	02
Message from Secretary	02
North East States Branch of IADVL Activity Report	03-08
Treasurer's Report	09
Dermazone East & Cuticon NE States 2025 Invitation	10
POETRY	11-12
• The Monarch of Hearts - Dr. Chayanika Patowari	
• Memories - Dr. Rahul Barman	
• The Lexicon of Skin - Dr. Devankur Dutta	
• As I sit by my Window - Dr. Leishiwon Kumrah	
ARTICLES	13-20
• Zubeen Garg - Dr. Anindita Baruah	
• Dermatology – The Lighter Side - Dr. Anupam Agarwal	
• Empowering the Future: Mentorship and Leadership in Modern Dermatology - Dr. Debajit Dutta	
• Some jumbled puzzles of life - Dr. Sunita Mech	
• The hype of Mounjaro and Ozempic: a life-sustaining drug or a beauty trend? - Dr. Lily Singha	
• Real Freedom - Dr. Bonny Rongpharpi	
• The Epidermis Enchanters - Dr. Gitartha Boruah	
• Syphilis Surprises - When You Least Expect It - Dr. Roshni Singh	
PHOTO GALLERY	21-43

From the Editor's Desk

Dear NEIADVLites

I am thrilled to announce that we will be presenting the new edition of the NEIADVL Newsletter at the upcoming Dermazone, East & Cuticon NE States, Agartala, on **11th December 2025**. This is a wonderful opportunity to showcase our community's activities and achievements. The newsletter also features a beautiful collection of poems, articles, paintings, and photographs contributed by our esteemed members, reflecting the immense talent, creativity, and knowledge within our fraternity.

My heartfelt thanks to Dr. Shyamanta Barua, President, NEIADVL, and Dr. Gautam Mazumder, Secretary, NEIADVL, for their constant guidance and support. A special note of gratitude to our editorial team members, Dr. Porimollika Boruah and Dr. Rahul Barman, for their tireless efforts and dedication in bringing this issue to life.

Looking forward to connecting with you all there.

Long live NEIADVL!

Regards,
Dr. Sagarika Gogoi
Editor, Newsletter, NEIADVL





NEIADVL NEWSLETTER

Volume: XXXI • December 2025

Official Mouthpiece of N. E. States Branch of IADVL



Message from President

Dear Members,

It gives me immense pleasure to reach out to all of you through this issue of our branch newsletter. The newsletter is a vibrant reflection of the collective energy and commitment of our dermatology fraternity. The past months have been marked by remarkable academic activity, collaborative spirit, and professional excellence that continue to elevate the reputation of our branch and association.

This newsletter captures not only these professional activities and achievements but also the creative expressions of our members, that foster a sense of belonging beyond academic boundaries. My heartfelt appreciation goes to the editor – **Dr. Sagarika Gogoi** – and the editorial team for curating this wonderful issue and to all contributors who have made it engaging and vibrant.

Our branch has earnestly launched its campaign against the menace of quackery in our composite specialty. We have engaged legal counsel and held productive discussions with the Anti-Quackery & Vigilance Cell of Assam Council of Medical Registration. Formal complaints have been filed with it and the Assam State Dental Council against dentists falsely claiming expertise as skin specialists, hair experts, trichologists, or aesthetic/cosmetic dermatologists.

We seek your wholehearted cooperation as we intensify this campaign in the coming days by reporting all unlicensed practitioners to relevant authorities and advocating stricter enforcement of dermatology practice regulations. These multipronged efforts will, hopefully, safeguard vulnerable patients from unqualified aesthetic and procedural dermatology treatments.

Let us continue supporting each other, learning and sharing practice insights, and upholding the high standards of empathetic care and compassion that define our specialty.

Long live NEIADVL! Long live IADVL!

Dr. Shyamanta Barua
President, NEIADVL



Message from Secretary

Dear esteemed colleagues,

It is with great joy and honour that I extend a warm welcome to all of you for the upcoming DERMAZONE EAST & CUTICON NE States 2025, scheduled on 11th, 12th & 13th of December 2025, at Agartala, Tripura.

This event not only brings us together as a community but also serves as a platform to showcase the latest scientific developments and innovations in our field.

This year's conference theme "**Dermatology: Bench to Bedside**" reflects our commitment in bridging the gap between basic research and clinical practice.

Our scientific team under able guidance of Dr. Kamal Das, Scientific Chairperson & Dr Rakesh Biswas, Scientific secretary curretted a comprehensive scientific programme, featuring invited speakers from across India, workshops, orations, keynote addresses, focused sessions, panel discussions, free papers, award papers & E-posters. Our aim is to provide a platform for learning, discussion, and exchange of ideas, keeping pace with the latest developments in dermatology.

As the secretary NEIADVL, I am proud to say that our editorial team has put together an informative and engaging newsletter that not only sheds light on the advancements in dermatology but also highlights the rich art, culture, and creativity of our region. Your presence at this conference is a testament to the power of collaboration and I am confident that together, we can make this event a huge success.

I congratulate Dr Sagarika Gogoi, editor newsletter & her entire editorial team for their tireless efforts & unwavering commitment in bringing this issue successfully to us.

I also congratulate all the contributors for their creativity and enthusiasm. I'm confident it will be an interesting & engaging read.

Thank you for being a part of this wonderful journey towards knowledge sharing and collective growth.

Long Live NEIADVL! Long live IADVL!

Warm Regards,

Dr. Gautam Mazumder
Secretary, NEIADVL



North East States Branch of IADVL(NEIADVL) Activity Report from JUNE 2025 to 30th NOVEMBER 2025

MEMBERSHIP DETAILS

TOTAL MEMBERS: 256 | LIFE MEMBERS 190 | PLM MEMBERS 76 | E -VOTERS: 186

MIDCUTICON NE States 2025: The 21st MIDCUTICON NE States 2025 was held on the 14th of June at the Waii International Hotel, Itanagar, Arunachal Pradesh, focusing on the theme of **“Quackery in dermatology & practice management.”**

Organizing committee: Organizing President: Dr Keni Lego, Organizing Secretary: Dr Swapan Majumder, Scientific Chairperson: Dr Gautam Mazumder, Scientific Secretary: Dr Saloni Katoch

Shri Indraneel Chowdhury, Advocate General, Govt. of Arunachal Pradesh & **Dr. Amarendra Pandey**, Convener, Anti-quackery, Legal & Ethics Committee, IADVL were the invited speakers who gave valuable insights on various aspects of quackery, its legal implications, and preventive measures to the attendees. It was a full day scientific programme with talks and panel discussion on quackery in dermatology and practice management. Free papers and E-poster presentations were done by post graduate residents with awards for the best paper and poster. **Dr. Saumya Jha** from AMCH, Dibrugarh was awarded the best paper and **Dr. Kristina Kashyap** from GMCH, Guwahati won the best poster. Our colleagues from different disciplines were

also sensitized regarding the menace of quackery in dermatology by involving IMA state branch President & Secretary. The conference received good media coverage especially highlighting quackery & skin health awareness issues.

Dermatologists and healthcare professionals attended the conference, interacted with the esteemed speakers and benefited from their expertise. It was one of the highest attended MIDCUTICONs in the recent past.

The SIG Acne & Appendageal Disease programme: It was successfully held on June 28th, 2025 at hotel Novotel, Guwahati, featuring expert discussions and panel deliberations. Dr. Sanjay Rathi, Coordinator and Dr. Abhineetha Hosthota, Convener along with local faculty members from NEIADVL, led the engaging lectures and interactive panel discussions on acne, appendageal diseases and acne scars with great enthusiasm & participation from the attendees. The event saw a significant participation from medical college faculty, consultant dermatologists, and postgraduate students. Representatives from various North East states attended the CME, making it a fruitful experience for all.

INAUGURATION : 10:30 am - 11:00 am		
SESSION 1: QUACKERY IN DERMATOLOGY		Chairperson: Dr. Jegesh Des, Dr. Debeeka Hazerika
Time	Topic	Speaker
11:00 am - 11:20 am	How can Dermatologists' effectively fight Quackery	Dr. Amarendra Pandey Convener, IADVL Anti-quackery, Legal & Ethics Committee 2025
11:20 am - 11:40 am	Legal pearls and pitfalls in our fight against quackery	Shri Indraneel Chowdhury Advocate General Government of Arunachal Pradesh
11:40 am - 12:30 pm	Panel Discussion: Quackery and its impact on Dermatology Moderator : Dr. Atul Bothra	Panelists: Dr. Birendra K Nath, Dr. Shyamanta Barua, Dr. Anupam Agarwal, Dr. Gautam Mazumder, Dr. Amarendra Pandey
TEA BREAK: 12:30 pm - 12:40 pm		
SESSION II - PRACTICE MANAGEMENT		Chairperson: Dr. Jahnvi Gogoi, Dr. Debajit Dutta
12:40 pm - 01:00 pm	Financial Aspects of Dermatology Practice	Dr. Anushree Baishya
01:00 pm - 01:20 pm	How to set up & market an Aesthetic Dermatology Practice	Dr. Aruna Devi
01:20 pm - 02:10 pm	Panel Discussion : The A-Z of establishing one's practice Moderator : Dr. Dipak Kumar Agarwalla	Panelists: Dr. Aruna Devi, Dr. Anushree Baishya, Dr. Angshuman Bhattacharjee, Dr. Anajyoti Bordoloi, Dr. Kinnor Das
LUNCH : 2:10 pm-3:00 pm		
03:00 pm - 03:15 pm	A Bouquet of Interesting cases	Dr. Krishna Deb Borman Director Professor, Department of Dermatology & STD, Moulana Azad Medical College, New Delhi

FREE PAPERS: 3:15 pm - 4:30 pm

Session 1

Approaches in acne and appendageal disorders		
Time	Topic	Speaker
4:45 PM - 5:05 PM	Whats new/ upcoming in acne therapy	Dr. Neirita Hazarika
5:05 PM - 5:15 PM	Rosacea: How to manage?	Dr. Gautam Mazumder
5:15 PM - 5:30 PM	Metabolic syndrome: its connection in acne and HS	Dr. Abhineetha Hosthota
5:35 PM - 6:15 PM	Panel Discussion: Case based discussion on acne & appendageal disorders	Moderator: Dr. Sanjay Rathi Panelists: Dr. Pankaj Adhicari, Dr. Shyamanta Barua, Dr. Abhineetha Hosthota, Dr. Bobita Boro, Dr. Smrity B Das
6:15 PM - 6:30 PM	Lamp Lightening & Inauguration	

Session 2

The Challenge of Acne Scars: Prevention & Advanced Treatment Modalities		
Time	Topic	Speaker
6:45 PM-7:05 PM	Understanding Acne Scarring: Pathogenesis, Classification & the Importance of Early Intervention	Dr Anita Marak
7:05 PM-7:25 PM	Acne scars management: when and how? (peels/laser, etc)	Dr Atul Bothra
7:25 PM-7:35 PM	Practical tips to prevent acne scars formation	Dr Khushboo Agarwalla
7:35 PM-8:05 PM	Panel Discussion: The Cutting Edge of Acne Scar Management A Multi-Modal Approach	Moderator: Dr. Saloni Katoch Panelists: Dr. Aruna Devi, Dr Jagjeet Sethi, Dr Anushree Baishya, Dr Nazneen Jahan, Dr Dipak Agarwal
7:50 PM-8:00 PM	Closing remarks/ Thanks giving by Dr. Anushree Baishya (Local coordinator)	





CHAPTER ACTIVITIES

AGARTALA CHAPTER

25.06.25: CME on “Practical use of minoxidil in hair loss treatment and its clinical relevance” by **Dr. Sumit Bhattacharjee**.

07.09.25: Joint CME on “Psychosexual health: the new frontier” by Indian psychiatric society, Tripura State Branch in collaboration with Agartala Chapter of NEIADVL. The speakers were: **Dr. Santanu Ghosh** (psychiatrist) & **Dr. Nandita Bhattacharjee** (dermatologist). It was a very interactive & successful meeting amongst the dermatologist & psychiatrist colleagues with a significant number of attendees.

BARAK CHAPTER

19.07.25: CME on “Chronic itch & antihistaminics” by **Dr. Shromona Kar**.

17.10.25: CME on “Psychocutaneous Diseases: A Dermatologist's Perspective” Barak chapter of NEIADVL in association with Dept of Dermatology, SMCH organized at Cachar club, Silchar. The scientific session featured **Dr. Sudip Ghosh** as speaker and was chaired by **Dr. Krishna Talukdar** and **Dr. Saswati Haldar**.

GUWAHATI CHAPTER

12.06.25: Dermoscopy Workshop cum CME: A Dermoscopy Workshop cum CME was organized by the Guwahati Chapter of NEIADVL in collaboration with the Department of Dermatology, Gauhati Medical College & Hospital. The workshop, held at the Department premises from 10 a.m., was followed by an evening CME at Hotel Arista by Ambition, Guwahati. **Maj. Gen. (Dr.) Manas Chatterjee** served as the resource person, delivering a highly engaging session on practical dermoscopy and its clinical relevance. The event saw active participation from dermatologists, faculty members, and postgraduate students across institutions.

25.10.25: CME on i) Facial Hyperpigmentary Disorders – Challenges in Diagnosis and Management by **Dr. Mary Z. Chhangte**, Associate Professor, AIIMS Guwahati.

ii) Topical Clindamycin Phosphate 1.2% + Benzoyl Peroxide 3.75% Aqueous Gel by **Dr. Th. Meghna Devi**, Senior Resident, AIIMS Guwahati. The session facilitated rich academic interaction and clinical discussion among attendees.

SHILLONG CHAPTER:

27.06.25: CME on “Pathogenesis of Atopic Dermatitis” by **Dr. Gurudarshane**, & “The Management of Atopic Dermatitis” by **Dr. Karthi Kishore** at Hotel Highwinds, Shillong.

09.10.25: CME on “Oral Minocycline -indications, efficacy, safety, and practical pearls in dermatologic use” by **Dr. Karthi**

Kishore at Hotel Polo Towers, Shillong.

13.10.25: CME on the following subjects: i) Urea: Mechanism of Action and Its Clinical Uses in brief - **Dr. Donborlang Byrsat**.

ii) Approach to Venous Ulcers: Practical Insights for Daily Practice—**Dr. Abigail Syiemlieh**.

iii) Management of FPHL—**Dr. Urmila**, IADVL Observer, at Hope Clinic, Shillong.

NAGALAND CHAPTER

12.07.25: CME on psychodermatology on the theme of “Acne vulgaris & its impact on quality of life: a multidisciplinary approach” at CIHSR. The following topics were covered followed by a panel discussion at the end of the speech.

i) “Patient perception vs. clinical severity: The role of body dysmorphic disorder and its implications for dermatologic care in acne” by **Dr. Sentila Longkumer**, Consultant & HOD Dermatology, CIHSR.

ii) “When acne hurts more than skin-deep: A psychiatrist's perspective” by **Dr. Takum Mokholee**, Consultant Psychiatrist, CIHSR.

iii) “Psychotherapy interventions for enhancing self-esteem in individuals with acne” by **Mrs. Imlibenla Mongro**, Clinical Psychologist, CIHSR.

Panel theme was “Beyond the surface: The Mind-Skin connection in Acne management” moderated by **Dr. Atoka Sumi**, Dermatologist, Eden Hospital & all the speakers were the panelists. The session was much thought provoking & engaging.

28.08.25: Workshop on Botox and Skin Boosters conducted by **Dr. Aruna Devi** as the Resource person at CIHSR, Dimapur.

NEIADVL SOCIAL AWARENESS ACTIVITIES: World Vitiligo Day was observed by NEIADVL members across various states, organized by medical colleges & city chapters. Silchar Medical College in association with the Barak Chapter of NEIADVL organized a poster-making competition for undergraduate students. The two best posters were selected by our judges, and the winners were awarded prize money along with mementos. Dermatology PGTs from SMC performed a thought provoking skit aimed at breaking the common myths surrounding vitiligo.

Jorhat Medical College and Hospital (JMCH) proudly organized an awareness programme in line with this year's theme “**Innovation and AI: Empowering Vitiligo Awareness and Care.**” As part of the awareness initiative, informational pamphlets were distributed to educate the public about the myths and facts of vitiligo, highlighting the importance of early consultation and compassion in care. The highlight of the program was an impactful skit performed by the enthusiastic MBBS students, creatively delivering a message against

discrimination and encouraging empathy, inclusion, and scientific understanding.

Moreover, an interactive session was also held with patients debunking the myths and social stigma regarding vitiligo. The message conveyed in the discussion was that through lens of innovation and artificial intelligence, we envision a future with better diagnosis, management, and above all, societal acceptance of vitiligo.

Dr. Sunita Mech observed World Vitiligo Day at Composite Hospital CRPF, Guwahati.

Diphu Medical College faculty, nurses & UG students participated in the programme in the form of awareness meeting, skit performance by phase 3 students, handing out “myths and facts” leaflets and distributed free medicines to vitiligo patients.



Tripura Medical College in association with Agartala chapter of NEIADVL observed the day along with patients, attendants, nursing staff and students.

A multi-speciality health camp was attended by the **Nagaland Chapter of NEIADVL** in association with Rotary Club of Dimapur & Innerwheel Club of Dimapur on 26.09.25 at Govt. Higher secondary School, Singrijan.

NEIADVL WORLD SKIN HEALTH & AWARENESS CAMPS: On 13th July, 2025 NEIADVLites organized 19 camps across the NE states as a part of IADVL's historic International Book of Records Attempt. The skin health camps were held at slums, orphanages, old age homes, and prisons. More than 90 doctors participated in this mega mission of IADVL & served 1352 patients with free skin health awareness & consultations along with distribution of free medicines. Moreover, activities received a great publicity by various local & national print, electronic & digital media platforms with wider penetration & coverage in the community.

NEIADVL MEDIA CELL ACTIVITIES: A total of 23 creative posts and reels have been shared in the official NEIADVL Instagram handle as a part of skin health awareness initiatives. The uploaded content is primarily focused on anti-quackery and awareness under the active & enthusiastic guidance of **Dr. Jagjeet Sethi & Dr. Saloni Katoch**. A few of the videos have been translated into Hindi & Assamese languages for wider penetration in the community.

Administration & Meetings:

NEIADVL installed its 7th city chapter during MIDCUTICON, as Arunachal chapter of NEIADVL. Dr Keni Lego is the founding President & Dr Swapan Majumder is the Secretary of the chapter.

23.08.25: IADVL midterm CC meeting was held in Delhi & was attended by Dr Shyamanta Barua, Dr Rajib Kumar Gogoi, Dr Gautam Mazumder, Dr Krishna Talukdar and Dr Bornali Dutta.

19.08.25: EC NEIADVL & organizing committee of DERMAZONE EAST & CUTICON NE STATES 2025 was convened to appraise the overall ongoing preparation of the conference committee to the EC Members. A few more matters were discussed like conceptualization of scientific topics, proposed faculties, orations, screening guidelines for award papers, posters etc.

19.10.25: EC NEIADVL convened a zoom meeting with the IADVL East Zone Council to appraise & discuss about the number of orations & zonal award papers to be conducted during the Dermazone East 2025 at Agartala. After a thorough discussion it was decided that a zonal oration titled "IADVL EAST ZONE ORATION" will be conducted & the SOP for the same will be finalized in East zone GBM to be held at Agartala. Also, it was decided that only one extra oration for this year as suggested by central IADVL titled "IADVL GOLDEN JUBILEE ORATION" will be conducted to celebrate the 50 years of IADVL constitution.

23.10.25: EC NEIADVL with NEIADVL academy & organizing committee of DERMAZONE EAST & CUTICON NE States 2025, reviewed the overall scientific programme of the conference. The lists of candidates for three orations were suggested & shortlisted accordingly. All the members of the meeting agreed upon screening & shortlisting the best ten award papers if the number of submissions are high & this will be done jointly by the academy & scientific committee of DERMAZONE EAST 2025.

ANTI-QUACKERY ACTIVITIES:

13.07. 25: An article on quackery titled "**Bane of quackery in dermatology**" was published by EC NEIADVL in the most widely circulated English daily, the Assam Tribune. The article emphasized the importance of public awareness, ethical practices by healthcare professionals and strict enforcement of existing laws and regulations by the government.

25. 08. 25: A complaint was sent to G-Plus portal for erroneously

referring to an MBBS doctor as a Dermatologist in their article on hair fall. They were requested to remove the article from the public domain or take corrective action. There has been no response to the same and the EC NEIADVL will take further measures as per legal provisions.

29.10.25: EC NEIADVL appointed Advocate Jishant Barua as the legal counsel for NEIADVL on locum/per case basis. The scope of his work will include drafting and issuing legal notices on behalf of NEIADVL especially in our endeavours against Quackery in the North East region.

13.11. 25 & 16.11. 25: A complaint was filed with the Anti-quackery and vigilance cell, Assam Council of Medical Registration regarding endorsement and employment of a dentist as a skin specialist in Apollo clinics, Ulubari, Guwahati. The complaint was also sent to the CEO and regional manager of Apollo clinics, DME & Assistant DME (Assam Council of Medical Registration) and our advocate.

18.11.25: After a meeting of the EC NEIADVL and Anti-quackery committee, directives for NEIADVL members to strengthen our Anti-quackery endeavours and safeguard member interests were published and widely circulated on the official WhatsApp group of the branch. It was decided that a Google form will be circulated among the members to submit complaints regarding unqualified practitioners.

19.11.25: In response to our complaint to the Anti-quackery and vigilance cell, a summon was sent to Apollo clinic, Ulubari. An undertaking was taken from the dentist to stop skin consults and aesthetic procedures. Apollo clinic was instructed to remove all signages/advertisements etc with immediate effect and employ only certified skin specialists in their Dermatology department henceforth.

21.11.25: A complaint was submitted to the Assam State Dental council regarding dentists in the state misrepresenting themselves as skin specialists/skin experts/hair experts/trichologists/aesthetic and cosmetic dermatologists and operating clinics under the label of Skin/Laser/Aesthetic/Hair. The complaint was copied to DME, Assistant DME, Anti-quackery and vigilance cell, Assam Council of Medical Registration (ACMR) and our advocate. Response to the same is awaited.



Dr. Gautam Mazumder
Secretary, NEIADVL





Treasurer's Report - NE States Branch of IADVL

STATEMENT FROM 1ST JUNE - 30TH NOVEMBER 2025

GST No: 18AAA9928M1ZW (opened in Feb 2020)

OPENING BALANCE in NEIADVL Saving Account as on 1st JUNE 2025 - Rs. 14,02,464/-
CLOSING BALANCE in NEIADVL Saving Account as on 30TH NOVEMBER 2025 - Rs. 22,82,529.90/-

Sl. No.	EXPENDITURE	AMOUNT in Rs.	TOTAL in Rs.
1.	CUTICON NE States 2024 EXPENSES (TRAVEL AND ACCOMMODATION- QUIZ MASTER AND ORATOR)	49,407	49,407
2.	MIDCUTICON 2025 EXPENSE (PAYMENT MADE TILL 30 NOVEMBER)	8,00,000	8,00,000
3.	INCOME TAX- FINANCIAL YEAR 2024-2025	4,44,770	4,44,770
4.	MIDCUTICON – AWARD PAPER	3,000	3,000
5.	EXPENDITURE FOR BRANCH OFFICE		42,151.1
	WIFI BILL (MAY-SEPT 2025)	4,478.1	
	ELECTRICITY BILL (MAR- OCT 2025)	9,085	
	MAINTENANCE OF LIFT and WATER CONNECTION CLEANING OF THE OFFICE (Salary of cleaner from JULY—OCT 2025)	15,472	6,000
	Cleaning supplies	311	
	ELECTRICAL WORK	6,805	
6.	TRAVEL EXPENSE FOR CC MEET (Branch Secretary)	7,093	17,093
7.	LATE CHARGES FOR GST	5,090	5,090
	TOTAL		Rs. 13,61,511.1

INCOME DURING THE PERIOD JUNE 2025 TO NOVEMBER 2025

Sl. No.	INCOME	AMOUNT in Rs.
1.	CUTICON NE States 2024 SHARE	12,56,000
2.	MIDCUTICON NE States 2025 COLLECTION (Till Nov 2025)	9,41,780
3.	CREDIT INTEREST FROM SAVINGS ACCOUNT	24,403
4.	STATE SHARE ON IADVL MEMBERSHIP FEES (Month APR- SEPT 2025)	22,394
	TOTAL	Rs. 22,44,577

FIXED DEPOSITS- THREE FIXED DEPOSITS AT SBI, GMCH BRANCH-

1. RS 30,00,000 (VALUE DATE 21-10-2024 AND MATURITY DATE 06-01-2026)
2. RS 20,00,000 (VALUE DATE 21-10-2024 AND MATURITY DATE 06-01-2026)
3. RS 01,07,214 (VALUE DATE 25-06-2025 AND MATURITY DATE 29-07-2026)

Total CREDITS from 1st JUNE 2025 TO 31st NOVEMBER 2025 = **Rs. 22,44,577/-**




Total DEBITS from 1st JUNE 2025 TO 31ST NOVEMBER2025 = **Rs. 13,61,511.1/-**

Opening Balance in our Savings Account as on 1st JUNE 2025 = **Rs. 14,02,464/-**

Closing Balance in our Savings Account as on 30th NOVEMBER 2025 = **Rs. 22,85,529.90/-**

Sd/-

Dr. Monali Sutradhar
Treasurer, NE States Branch IADVL



DERMAZONE EAST & CUTICON NE STATES 2025

INVITATION

Dear Colleagues,

On behalf of the organizing committee, we extend our warm & cordial invitation to you to participate in **DERMAZONE EAST 2025, 31st East Zone Conference of IADVL & CUTICON NE STATES 2025, 36th Annual Conference of NE States Branch of IADVL**, scheduled to be held from 11th-13th December, 2025 at Agartala, Tripura.



The conference theme **“Dermatology: Bench to Bedside”** highlights our commitment in bridging the gap between basic research and clinical practice. We have curated a comprehensive scientific program that includes workshops, keynote addresses by renowned experts in the field of dermatology, orations, and plenary sessions on cutting-edge topics, E-posters, quiz competitions, and free paper presentations. It will be an honour for us to have you onboard with the faculties & delegates not only from the member states of east zone IADVL comprising **Bihar, Jharkhand, Odisha, West Bengal, Manipur and North East States**, but also from other parts of the country.


Tripura boasts a scenic landscape with lush greenery, vibrant hills, and winding rivers. The state is known for its rich cultural heritage, including various indigenous tribes, and its historical significance. Moreover, its culinary scene is a delightful blend of Bengali and Tribal influences, featuring unique dishes like Mui Borok, Gudok, and Chakhwi. The diverse landscapes and historical sites make Tripura a captivating destination. The state capital, Agartala is well connected by air and train with Kolkata, Guwahati, Delhi, Chennai and the rest of India. Our venue **Agartala International Fair Ground, Hapania** is located just 10 minutes away from the heart of the city, which offers a delightful blend of modern amenities.

We look forward to welcoming you all in this scientific, cultural & culinary extravaganza for an enriching & memorable experience.

Warm regards,

TEAM DERMAZONE EAST & CUTICON NE STATES 2025

 <p>Dr. Nirmalya Malakar Organizing President Dermazone East & Cuticon NE States 2025</p>	 <p>Dr. Gautam Mazumder Organizing Secretary Dermazone East & Cuticon NE States 2025</p>
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POETRY

THE MONARCH OF HEARTS

Somewhere among the hills
Milky cascades in a country unseen
Where silence breaks by humming of birds
Where kites fly unbothered free
Faraway in a mystical place
A Monarch rises
One of a kind
With voice that resonates
Among men's hearts and souls alike
An angelic being
A mesmerizing presence
His heart pounds for all that's living
Whose name triggers a million emotions
The world celebrates as he treads
A tremendous force
Hope encompassing generations
He who bears good tidings for all

But the world's flawed
Unsuitable for the likes of him
Darkness looms large, the light's not enough
Undeterred, he proceeds
Radiating compassion and warmth
Bringing men together
Equal as we are before the Supreme being
Not a care of his own
He forges ahead

A body, broken but incessant mind
His unwavering quest for a better earth
The darkness envelopes him like a shroud
The king falters not
Euphonious voice sending men into raptures
A beacon of hope in vain selfish world
He captures he rules

Till....

The darkness prevails
Into the raging ocean's depths
The golden voice alas snuffs out
Vanishes what flickers bright in a nation's midst
All is lost
With the shepherd gone
The sheep move in chaos The country mourns
In reverence the world raises its head
But never to return an untarnished soul
His greatness unfolds
A legacy shine on
Forever with relevant melodies
Hearts but left with anchoring heaviness



DR. CHAYANIKA PATOWARI
Consultant Dermatologist, Guwahati

Memories

I have drowned a thousand rivers
to swim the river whose water I never touched
I have fallen a few more times
just to stand up when everything else crushed
Dreamt of a life I didn't know I needed
living a life which is so far the best I could negate
Walking the lanes of memory down
still not remembering whose fault was it when I gave up
and had my calm
The numerous stars in the night sky waiting to be counted
only to be known as a light from the past
I hope one day we shall meet
and cross paths and wish they will last.

Dr. Rahul Barman

PGT, Department of Dermatology
Assam Medical College, Dibrugarh

The Lexicon of Skin

The body's surface, a complex, telling scene,
We read the morphology where signs convene.
Not just a rash, but patterns we must heed,
The silent language of the body's need.

A delicate macule, a papule's slight ascent,
The thickened border where the plaque is sent.
We trace the reticular or serpiginous lines,
Deciphering the code the stratum defines.

For in this layer, beneath the outward shell,
The secrets of the illness start to swell.
We see the vesicle, the bulla, thin and clear,
Unveiling processes that fill the layperson with fear.

We see the science, and we wield the art,
To you esteemed Dermatologists,
who know the skin by heart!

Dr. Devankur Dutta

Consultant Dermatologist, Jorhat

As I Sit by My Window

As I sit by my window,
I can hear the birds chirping in the trees.
And it reminds me,
Reminds me of what is written in the Good Book,
The birds in the air,
They worry not
For their food.
For the Heavenly Father provides it all for them
Jehovah Jireh!

As I walk to the Hospital for work,
I see the wild flowers blooming
In white, yellow, and blue
Beautiful and bright
In the morning sun.
And it reminds me,
Reminds me of what is written in the Good Book.
The lilies of the fields are clothed
more brilliantly and beautifully than Solomon
in all his glory
For the Heavenly Father's clothes, them.
Jehovah Jireh!

As I walk past the trees,
I can feel the gentle breeze touch my skin
The leaves are gently fluttering
And it reminds me,



Reminds me that my God is with me
Within me
Though I cannot see,
His love flowing in me
Oh! let it overflow
That it may touch the lives of those I meet today

As I look around me,
I see the fresh, new green leaves
Sprouting from the barren trees of autumn.
Reminds me,
Reminds me that out of a seemingly dead life
My God can breathe life
Life is refreshing, beautiful, and glorious
For He is
The Life-giver, the Creator!

As I walk back from work
Walking by the Jasmine trees
Sweet fragrances fill my senses
Reminds me,
Reminds me that the praises I raise
To my God
Rises like sweet fragrances to His throne
Above in the Heavens
Oh! What glorious joy filled my heart!

Dr. Leishiwon Kumrah

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ARTICLE SECTION

ZUBEEN GARG

A Living Legend, A Living Song

DR. ANINDITA BARUAH

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Some voices entertain; some heal — but only a rare few become a part of our lives, transcending generations and lasting for an eternity. Zubeen da's voice belongs to that rare kind, holding gentleness and defiance in the same breath, and adding joy and love to our mundane lives.

Arriving in Guwahati with only a keyboard and a dream, Zubeen da went on to sing over 38,000 songs in more than 40 languages. He also directed as well as acted in several Assamese movies. For the people of Assam and beyond, he had been an unspoken teacher. His songs were not just for entertainment — they carried social messages and deep meaning. This is precisely why they have had such a massive impact on all of us.

Zubeen da was far more than just a singer. He was a revolution, and yet he was home — always happiest among his people, untouched by praise or criticism. A living legend, he will remain so forever.

JOI ZUBEEN DA!

Dermatology – The Lighter Side

DR. ANUPAM AGARWAL

Consultant Dermatologist, Tinsukia

We all have our fair share of struggles and stresses in our profession. This bit should try and take your mind off of it and hopefully make you smile.

MEN vs WOMEN: THE SKIN & HAIR EDITION

Skin and hair — the great equalizers of humanity. Doesn't matter who you are — your pores, pimples, and hairline are all plotting a g a i n s t y o u . But the way men and women deal with it? That's where the comedy begins.

The Skin-Care Routine Showdown

Women: Their skincare shelf looks like a NASA control panel. Cleanser, toner, serum, moisturizer, sunscreen, night cream, under-eye gel, face mist, jade roller — all arranged by colour, vibe, and planetary alignment.

Men: “Bro, I just use soap.” Same soap. For face. Body. Hair. And sometimes... the bike.

Then they wonder why their skin looks like it's been washed with dish liquid and regret.

The Hair Care Routine

Women: They've got shampoos with names like “Silky Moroccan Argan Bloom with Moonlight Essence.” Every wash is a ritual — oil massage, mild shampoo, cold rinse, conditioner, hair mask, leave-in serum, prayers, and a small sacrifice to the hair gods.

Men: “Shampoo? I use whatever's there.” That “whatever” could be dog shampoo — they don't care, as long as it foams. And if they find two-in-one shampoo-conditioner? They think they've hacked life.

Pimples: The Universal Villain

Women: See one small pimple, panic like it's a national emergency. Apply five spot treatments, cover it with concealer, and still cry in the mirror. Then post on Instagram with #NoFilter and 14 filters.

Men: Notice a pimple the size of a continent and go, “Cool.” Then pop it like they're performing surgery with zero sanitation and full confidence. Next day? Infection. “Bro, I think my face is melting.”

Aging Gracefully (Or Trying To)

Women: Buy anti-aging creams that cost more than rent. “Retinol at night, SPF in the morning, affirmations at lunch.” Still freak out at one fine line like it's a personal betrayal.

Men: Wake up at 40, look in the mirror, see wrinkles, and go, “Yeah, rugged look. I like it.” They call crow's feet “character” and under-eye bags “experience.”

Dermatologist vs Patient — The Battle of Skincare Logic

Dermatologists — the brave warriors who studied for years just to hear patients say, “Doctor, I googled it.” Let's dive into the eternal tug-of-war between professional science... and WhatsApp University.

The Consultation Begins

Dermatologist: “So, tell me what brings you in today.”

Patient: “Doctor, I have a small rash. I think it's due to stress, diet, maybe my mother-in-law, or Mercury retrograde.”

The dermatologist tries to stay calm, but inside they're like, “*Here we go again.*”

The Home Remedy Chronicles

Dermatologist: “You shouldn't apply random things on your face.”

Patient: “But doctor, my aunt told me haldi with toothpaste cures everything.”

Next thing you know, the patient walks in glowing — not from health, but from chemical burns and shame.

The Fairness Obsession

Patient: “Doctor, I want glowing, fair, spotless skin!”

Dermatologist: “Let's focus on healthy skin.” **Patient:** “No, doctor, I want skin like Korean glass mixed with Photoshop and divine light.”

Some patients don't want treatment. They want *rebirth*.

The Product Hoarders

Dermatologist: “What skincare are you currently using?”

Patient: “Nothing much - just a cleanser, toner, serum, moisturizer, retinol, niacinamide, vitamin C, snail cream, hyaluronic acid, sunscreen, and a jade roller.”

The dermatologist nods slowly, wondering why this person's skin hasn't filed for divorce yet.

The Payment Philosophy

Dermatologist: “This treatment costs Rs. 3,000.”

Patient: “What? Too expensive!”

Next day:

Patient on Instagram: “Just bought new serum from Korea - Rs. 4,999 only!”

Final Verdict:

Dermatologists believe in science.

Patients believe in Google. And somehow, both survive.

Dermatologists don't need therapy. They just need one good meme, one strong coffee, and one patient who says, “Doctor, I followed your advice - and it worked.”

That's it. ADIOS.

Empowering the Future: Mentorship and Leadership in Modern Dermatology

DR. DEBAJIT DUTTA

Consultant Dermatologist, Dibrugarh

Dermatology, as a specialty, is evolving at an unprecedented pace, propelled by technological innovation, shifting patient expectations, and expanding scientific discovery. To sustain this growth and uphold standards of excellence in skin health, cultivating strong mentorship and leadership pathways is no longer optional; it is essential. These efforts enrich professional development, drive innovation, reduce disparities, and ultimately define the future landscape of dermatologic care.

The Enduring Value of Mentorship in Dermatology

Mentorship remains a foundational pillar in the professional journey of every dermatologist. Experienced clinicians play a transformative role by offering guidance, wisdom, and steady encouragement to early-career colleagues. Whether navigating complex diagnoses, refining procedural skills, pursuing research, or planning career trajectories, the presence of a committed mentor can be life-changing.

A mentor does more than teach—they model integrity, clinical acumen, empathy, and resilience. They empower emerging dermatologists to build confidence, cultivate curiosity, and strive for excellence.

Benefits of Effective Mentorship

- Enhanced skills in clinical practice, research methodology, and leadership
- Expanded professional networks within national and international forums
- Increased confidence and resilience, especially for those from underrepresented groups
- Clearer and more achievable career pathways.

Strategies for Meaningful Mentorship

For mentorship to be truly impactful, it must be intentional, personalized, and structured. Effective mentoring relationships often incorporate:

- Tailored guidance aligned with individual aspirations
- Consistent communication, constructive feedback, and goal-setting
- Support for innovation, academic pursuits, and collaborative research
- Integration of leadership skill-building within routine interactions
- Advocacy for diversity, equity, and inclusive growth opportunities

Such thoughtful approaches ensure that mentees not only grow as clinicians but also evolve as future leaders.

Leadership Development: Preparing Dermatologists for Tomorrow

Beyond mentorship, formal leadership development initiatives further strengthen professional readiness. These programs equip dermatologists with the skills needed to lead teams, manage change, and influence the direction of healthcare.

Key components may include:

- Workshops on strategic planning, clinical governance, and operational management
- Participation in research leadership, committees, and task forces
- Shadowing experiences with seasoned clinical leaders
- Structured courses on healthcare policy, administration, and advocacy

These opportunities nurture confident leaders who can shape both practice environments and broader dermatologic policy.

Embracing Challenges and Advancing Opportunities

Mentorship efforts can be limited by time constraints, geographic barriers, and resource shortages. However, new technologies now offer powerful solutions:

- Virtual mentorship platforms expand access across regions and specialties
- Online leadership modules provide flexible, self-paced learning
- Digital case discussions and communities strengthen peer-led learning
- Professional societies and institutions play a pivotal role in strengthening mentorship culture by:
- Establishing formal structured programs
- Recognizing and rewarding mentoring excellence
- Encouraging senior dermatologists to actively mentor, lead, and inspire.

Conclusion

Investing in mentorship and leadership development is an investment in the future of dermatology itself. By uplifting emerging clinicians today, we cultivate a dynamic, skilled, and compassionate dermatology community for tomorrow. Strong mentors create strong leaders—and strong leaders elevate patient care, research innovation, and the specialty as a whole.

Some jumbled puzzles of life

DR SUNITA MECH

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As a young child I always wondered. I felt like I was trapped inside a body. I am not able to go far away, beyond this body. I can see and feel only a limited area around me. I am trapped. Why am I living? Every few days I can see some new births and at some intervals of time I hear the news of death of some or the other in the village, mostly the elderly, sometimes young working adults and sometimes even the youngsters and even the infants. I could understand that once we are into this world, it is definite that we will leave this world sooner, or later. It's a great puzzle whose turn is next. The passing away of the people who are dependent on others may not create havoc in the existing left family or relatives, except the emotional disturbances, but when the young, working, earning adults are gone in the middle of their lives, a havoc is created in the family and relatives. However, death is the ultimate truth of life and nobody can escape it.

I met a family. The first child in the family died in infancy or as a toddler.



Later the family had three more children. All the three had not seen the eldest who died. When I met them, it might have been around 15 years when the eldest had died. The family including the youngsters who had never met the dead was still mourning the death. I was wondering, "Is it not time to move forward? The one who has left, has already left, but the mourning has not allowed the living ones to live, they aren't able to live the life forward. What is the responsibility of the parents in this case?"

All of us know that we are all temporary living entities, then why do we fight with each other, why don't we respect each other, why do we think ourselves as superior and some other people inferior, and act and fight accordingly. However, later on I came to know that there is something called inferiority complex also.

There was one great thing about covid. Covid had united the human race. Covid proved that whether you are rich or poor, Hindu or Muslim, lower caste or the higher, death is inevitable for everyone. Human beings learnt to help each other crossing all the barriers they had made amongst themselves otherwise. Except for the torture of isolation, the news about human murders had reduced. However, human beings forget quite fast. Life is almost the same as before now in matters of humanity in humans as the pre-covid days.

Reading the newspaper has always been a difficult task for me. I believe that to read newspapers, we need to have a rough and tough heart, to bear the pain they spread, in the front page, giving news of all the murders, mischiefs, other bad or sad information. Most of the daily newspapers are framed likewise. So usually, I used to read only the middle pages containing stories, movie information and some other easy to hear news. Other information, I gather from others' talks, hearing it passively. My knowledge may not be vast! Recently I came across an Odia newspaper spreading only positive information in the front page. I hope the world is changing.

The news about rapes, murders, the story about "Nirbhaya" often used to make me wonder again, "Why are we born? Why am I born? Suppose I am married tomorrow, why shall we give birth to the next generation? What will I show them? Shall I tell them, living life is painful?"

I can see my parents working hard round the clock to earn our living, invest in our studies and help others. I am the third one in the family. I often used to tell my mother, "Would not it have been better if you had only two children, you would have been able to take better care of the first two and also enjoy your life at the same time, with a bit of time for relaxation." I can't remember a proper answer, but she used to speak about fate and destiny.

I often tried to find out from my parents which child of theirs they used to love more. I found no answer, till date. I am happy and glad that I have such beautiful parents. As I was growing, I knew my life wasn't worth much at that moment. So I used to pray everyday, "God, if You want to take any life from my family, take mine, leave my parents, give them a long healthy life, many lives are dependent on them". I just wanted to become independent as soon as possible, relieve them from the burden of earning for my livelihood and at the same time help myself as well as the others. "I never want to be a burden on anyone", "I want to help myself as well as others", were the mottos of my life.

Another question is why do we give so much importance to earning money, property, and keeping it confined to ourselves or our families. Why should we hanker after everlasting mobile properties like silver,

gold, diamond, ruby etc or immobile properties, when we ourselves are not everlasting? Hanking is okay, earning is okay, the most disturbing fact is when you hurt someone else for your lust. Often, I do not understand how a human being can harm some other human being. There will definitely be some ways that all of us can grow together, all in a positive direction. One day you will be gone and it is not certain you are born again or not, if you are born, you may not be in the same biological family.

Born in a Hindu family, we are taught since our childhood that there are 33 crores of Gods. The house, the kitchen utensils, the tables, chairs, books, every human and every animal around us is a God. The person who loves others, who helps others can stay happy, he or she earns happiness. True to these sentences, I love every human being, I respect everyone and everything around me. But you may be surprised, even with this big heart, I was never happy till more than 30 years of my life. Things are easier said than done. The first few years of life, I was always worried, "Life is so uncertain, what will happen if our parents leave early." Later on as I became independent financially I used to think, "I love everyone. I was expecting love from everyone. I do good, I was expecting good from others". This expectation always used to keep me unhappy. Everyone is not equal. The one whom you love may not love you and the one who loves you may be ignored or unnoticed by you. Sometimes, even when you know that the person in front of you loves you, cares a lot for you, seems meaningless, as if you were expecting something else.

I remembered one of my college friends saying "All of us know that we all will die one day, so shall we not live today". As I used to wonder about the purpose of my life I often remember this sentence.

As a child, I knew there was nothing a human being couldn't do. I am influenced a lot by the Assamese poem "Nuaru ()" authored by Md Suleiman Khan, we used to read in class 3. We used to play a lot in childhood. I was my mom's pet. Wherever she asked to put my head in, I used to enter. So I learnt a little bit of dance, a little bit of singing, a little bit of recitation, a little bit of essay writing, a little bit of drawing, a little bit of public speaking, a little bit of acting, a little of writing, a little bit of cooking, a little bit of knitting, a little bit of stitching, a little bit of weaving, and what not. Maybe I am a Jack of everything. But I enjoy being the Jack in all the spheres. When I was in the process of becoming a doctor, I used to hear from someone or maybe I had the notion that doctors study, study and only study. So I tried to become the same. Tried to become the master in medicine, not the Jack in all spheres. Finally after a lot of years, I realised, "No, I am not!". I am not a very studious person. I don't enjoy my life by engaging myself only in academics. If I am meant to be a Jack, it's okay, let me be the Jack in all spheres of my life. At least I enjoy my life. At least I enjoy the moment I am living. Let the ones who want to judge, judge. I know I work better when all my senses are engaged.

After all the quests of life, I am a learned person now! Let's not wonder any more. Live the life you have been gifted till the last breath. Don't expect anything from others, even from the ones you have served, this includes your relatives, even your sons and daughters. Do whatever is best at your end and march forward. Love yourself for all your good deeds. Live each moment of your life in a way that you feel at the last moment of your life, "Yes! I have lived my life"

Syphilis Surprises When You Least Expect It

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In dermatology, we rely on morphology as our clue to clinch a diagnosis. Yet, at times, it can be deceptive. Keeping an open mind while evaluating a patient is essential — because the skin often tells stories beyond what meet the eye.

This case was one such reminder. A 25-year-old female presented with a round hyperpigmented macule near the right angle of the mouth and two similar lesions on the dorsum of the right hand, present for the past six months. These hyperpigmented macules exhibited intermittent erythema and showed recurrence following intake of oral medication for fever and sore throat. Subsequently, she developed an annular erosion on the lower labial mucosa and multiple circular erythematous patches on both palms. All lesions were asymptomatic.

Based on the history and clinical findings, a provisional diagnosis of Fixed Drug Eruption (FDE) was made. However, a VDRL test was advised — though syphilis was considered with the least suspicion, it was done to rule out the possibility nonetheless. On follow-up, the patient presented with a reactive VDRL (titre 1:16), and TPHA (1:1280) was also positive.

A final diagnosis of Secondary Syphilis with a history of FDE was thus established.

Syphilis continues to live up to its reputation as “the great mimicker.” Its protean manifestations can resemble various dermatological conditions,

often leading to diagnostic confusion. Secondary syphilis typically presents with maculopapular or papulosquamous eruptions, frequently involving the palms and soles, along with mucosal erosions or mucous patches in the oral cavity. Other features may include lymphadenopathy, condyloma lata, and constitutional symptoms such as malaise or low-grade fever.

In this case, the oral erosion and palmar erythematous patches were characteristic of secondary syphilis, yet their coexistence with old hyperpigmented macules of FDE initially diverted clinical suspicion. This case highlights the deceptive nature of syphilis and its ability to mimic a wide range of dermatoses. A meticulous clinical approach, supported by appropriate investigations, is crucial to avoid misdiagnosis. Clinicians should always keep syphilis in mind, even when another diagnosis appears more convincing — for the great mimicker often hides behind the most familiar presentations.

The hype of Mounjaro and Ozempic: a life-sustaining drug or a beauty trend?

DR. LILY SINGHA

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Over the last couple of years, a category of drugs has gained widespread attention for its dramatic effects on weight loss- Ozempic (Semaglutide) and Mounjaro (Tirzepatide). This has led to the FDA approval of Wegovy and Zepbound (different branding of the same medications) for weight loss. What originally began as treatment options for managing type 2 diabetes mellitus and clinically indicated obesity has now become enormously popular on TikTok, red carpets, and lifestyle blogs.

Their rise to fame has created a cultural moment and unfortunately, a medical dilemma.

It is no accident – the explosion of this “wellness” trend among the masses, with celebrities promoting the rapid effects of these drugs and influencers posting dramatic before-and-after transformations under hashtags **#Ozempicjourney**. As millions consume this content, it led to the perception of these medications as a “quick fix” to slimness rather than prescription drugs meant for chronic conditions. Some health care providers even feel pushed to prescribe them to remain competitive or satisfy patient expectations.

This glorification distorts and overshadows the drug's original purpose-treating **chronic metabolic diseases** that, when unmanaged, can lead to severe health complications. While their efficacy in medically indicated and supervised contexts is quite well established, the rising misuse for purely cosmetic reasons is deeply concerning. Such misuse further reinforces the dangerous beauty standards and weight stigma. In a society already steeped in a pervasive pressure to maintain unrealistic body shapes, it is not surprising that anti-diabetic medications have been repurposed into “beautification” tools.

As the supply of these medicines is diverted for cosmetic use, a pressing concern has recently emerged: shortages affecting the patients relying on these life-sustaining medications for their



Fig.1 Hyperpigmented macule near the right angle of the mouth



Fig.2 A hyperpigmented macule on the dorsum of the right hand



Fig.3 Erythematous macules on both the palms



Fig.4 An annular erosion on the lower labial mucosa

conditions. **These shortages are not just mere inconveniences;** they can have fatal consequences. For a patient with diabetes, missed doses can mean unstable blood sugar levels; for a patient with morbid obesity, delays in weight-management therapy can increase cardiovascular risk. Switching medications may often worsen symptoms or cause new adverse effects. And as these patients struggle to refill prescriptions, growing demand enables manufacturers and pharmacies to maintain higher prices. **Those living with chronic illness ultimately pay the price for trends they did not create.**

How exactly do these medications work? They act on certain receptors in our body called the incretin receptors. These in turn increase insulin secretion, slow down gastric emptying and reduce appetite, and ultimately lower the blood sugar levels.

Why does this matter? Because these medications are **not harmless.** They are not vitamin injections, wellness supplements or harmless “hack” injections—they are powerful metabolic drugs with physiological impacts, that are intended for long-term treatment under medical supervision.

Part of the problem is that many people do not understand that these drugs are not designed or tested for individual within a healthy weight range or for mild weight loss purely for aesthetic purposes. Yet social media often trivializes the complexity of these medications and their side effects, which include nausea, pancreatitis, gallbladder issues, severe dehydration, intestinal problems, thyroid concerns, and more. Additionally, the rapid weight loss induced by these drugs can cause muscle wasting, nutrient deficiencies, and long-term metabolic consequences. The infamous “**Ozempic**” **face** is actually the result of loss of facial fat, making the face look thinner, older and hollower, often with sagging of the skin.

Beyond the physical health, there are several psychological consequences of taking these medicines unsupervised. Casual use can mask eating disorders and encourage harmful dependency, instead of promoting the adoption of a healthy lifestyle. The rapid weight gain that often follows once the medications are stopped contributes to cycles of guilt, shame and diminished self-esteem, reinforcing the emotional vulnerabilities that drove the desire for the weight loss in the first place.

There is no denying that these medications have transformed the landscape of metabolic health and weight management. However, every leap of success brings responsibilities.

Addressing these issues calls for a more responsible path forward shared among the health care providers, policy makers, pharmaceutical companies and the public. Clearer communication is needed regarding eligibility criteria, the risks of unsupervised use and alternatives for those seeking non-medical weight loss. Strict supply monitoring, stronger prescribing guidance, and transparency around shortages can help protect patients at highest risk. Greater awareness encourages more responsible decisions and ensures that those with chronic disease are not deprioritized in favour of cosmetic trends.

As we continue to navigate the boundaries of wellness and aesthetics, we must remain mindful of the consequences of our choices. Prioritising medical needs over lifestyle wants and ensuring equitable access to essential medications is not just a healthcare issue—it is an ethical one.

The challenge is to embrace medical innovation without letting hype undermine necessity. Promoting awareness, fostering responsibility, and centring the needs of the medically vulnerable is the path forward.

Real Freedom

DR. BONNYMA RONGPHARPI

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~Are We Truly Free or Quietly Controlled?

There was a moment I will never forget — not because something dramatic happened, but because of how quietly it shook me.

A friend casually joked that I “wear cheap clothes” and that I should try “branded ones” since I am a doctor. It was a light comment, tossed in the air without intention, yet it landed heavily on my heart. I laughed it off in that moment. But later, while getting ready for clinic, I found myself staring at my wardrobe longer than usual wondering if my kurta looked “cheap,” wondering whether my patients silently judged my style, wondering if I should dress differently just to fit into someone else's idea of how a doctor should look.

For a few minutes, I was not choosing my clothes, the comment was choosing for me. My freedom slipped away unnoticed, replaced by a voice that wasn't mine. It made me realise something profound: We often lose our freedom not in big, dramatic battles but in small, everyday moments where someone's opinion becomes louder than our own self-worth. That moment became the seed of a bigger question that kept echoing in me —

What does real freedom even mean?

THE MODERN CAGE

How We Quietly Lose Our Freedom Everyday-

In Psychology there is a term called behavioral conditioning. This concept from explains how our behaviours are shaped, sometimes manipulated by repeated experiences, rewards, punishments, social expectations, or even subtle emotional triggers. Over time, we stop acting out of conscious choice and begin acting out of habit, fear, or learned patterns.

1. Classical Conditioning

Ivan Pavlov first demonstrated classical conditioning in a dog. In that experiment, he rang a bell before feeding dogs; eventually, dogs started salivating with the sound of bell. We humans also similarly get conditioned. For example-

- a) A student feels anxious when he/she hears the teacher's footsteps because of repeated past scoldings that created an automatic fear response in the student
- b) The sound of a phone notification creates excitement even if it is nothing important because the brain has already linked that sound with social validation in the past like getting likes or compliments on social media.

These classical conditioning creates reflexive responses. We are not choosing our reaction; it is the past that is choosing for us.

2. Operant Conditioning

When Rewards and Punishments Shape our Behaviour. In a study done by B.F. Skinner, animals (and humans) repeat same actions for which they were rewarded and they avoid those for which they were punished. For example,

- a) Social Media Validation Loop: when we post a good selfie or a reel. The Reward is - Likes, comments, shares. As a result, we feel pressured to post more even if it affects our mental peace or self-worth.

- b) A Child Who Has Stopped Asking Questions: Every time a child asks “why?” out of curiosity, his/her parents scold them. In this case, the punishment is annoyed reactions by the parents. As a result, the child grows into an adult who doubts their own curiosity.
- c) The Friend Group Approval Cycle: If we dress in a certain way and our friends compliment us. The reward in this case is social acceptance. As a Result, we stop wearing clothes that we personally love and feel comfortable and stick only to “approved” styles.
- d) The “Always Strong” Persona: If people admire us for “being strong” and never showing weakness. The Reward is Respect + image. As a Result, we hide our stress, emotions, or vulnerabilities just to maintain that identity.
- e) The Student who memorises instead of understanding. The Reward: good Marks. As a result, the student memorises everything and sadly loses the ability of critical thinking.
- f) The Overachiever Trap: Every time we do more work than required and people say, “You’re amazing”. Reward: Validation.
Result: we take on too much workload and burn ourselves out.
- h) Using Phone Whenever We Feel Bored: Whenever we are bored, we check our phone. Reward: Release of Dopamine from the brain to notifications. Result: Eventually, our brain gets conditioned to avoid silence or boredom.
- j) Avoiding Conflict at Any Cost: For example, if someone had once raised a key issue in any social gathering but instead had attracted lots of hatred from people and resulted in a huge scene in the past.
Punishment: Stress, tension.
The Result: They avoid necessary confrontations forever.

This type of conditioning turns us into approval-seeking machines. We do not realise that many of our choices are not actually ours, but rather these choices are subconsciously influenced by someone else's reactions.

3. Social Conditioning

The Strongest and Most Invisible One

Social conditioning happens when society, culture, and family train us to behave a certain way.

Few examples:

- “Girls should act modest.”
- “Doctors shouldn't look too fashionable.”
- “Be married by 30.”
- “Don't aim too high; no one in our family ever did.”
- “Straight hairs are beautiful”
- “Fair skin people are beautiful and not otherwise”

And many more ...

These statements may seem harmless, but over years will control our behaviour like an invisible remote control. And the worst part, we do not even realise it. We become predictable, programmable, and conditioned.

**ROOTED FREEDOM:

Reflecting on my childhood days, I saw freedom differently.

I noticed my grandparents and the elders. They wear comfortable clothes, the ones they really love and hold close to their heart. There

were not any brands or labels on their clothes. They also enjoy simple daily chores like farming, ploughing, carpentry works, etc. What I learned and realised now, is that they were grounded, and had true connection with one another, mutual trust and respect they value honesty over appearance, live in tune with Mother Nature & Choosing authenticity more than anything else. They were the ones truly celebrating their freedom daily. Indeed, the more rooted a person is, the less the world can manipulate them.

WHAT WE LOSE WHEN WE DON'T HAVE TRUE FREEDOM

We lose our authenticity Being authentic is the most beautiful thing. As every one of us are unique, beautiful, and different in our own ways. Our uniqueness is what makes us special. But losing true freedom means we become judgemental and bitter.

We lose true happiness.

We lose our inner voice and that is the deepest wound.

Without inner freedom, our life becomes meaningless. We become like Programmed machines-

We do not live, we act.

We do not express, we imitate.

We do not choose; we react.

So then, what is true freedom?

According to psychology - having more choices does not make us free, it often makes us more confused, more anxious, and more manipulable. True freedom is not the quantity of choices we have, but the quality of our inner state when we make them. Real freedom begins the moment we stop living as a reaction to society's/someone's expectations, fears, and judgments.

True Freedom Is ...

1. The freedom to think for yourself.
2. The freedom to choose without fear-
Fear is the oldest enemy of freedom.
Fear of judgment.
Fear of failure.
Fear of being different.
Fear of being alone.
Freedom is the courage to act even when fear whispers loudly.
- 3) The freedom from comparison
- 4) The freedom from validation addiction
- 5) The freedom to be imperfect
- 6) The freedom to rest without guilt
- 7) The freedom to live aligned with your values
- 8) The freedom to be authentically yourself. This is the highest form of freedom and the rarest.
To laugh loudly.
To wear what we love.
To follow and value our culture proudly.
To speak the truth.
To live as who we are, not as a copy of the world.
Freedom is not rebellion.
Freedom is honesty.



In the simplest word,

True freedom is - when the no one in the world decides who you are, but You do.

**“The day our choices come from our soul and not from our fears, that day we truly become truly free.” **

As Rabindranath Tagore had written so beautifully, which is indeed the true essence of real freedom.

“Where the mind is without fear”

-By Rabindranath Tagore

Where the mind is without fear and the head is held high,

Where knowledge is free,

Where the world has not been broken up into fragments

By narrow domestic walls,

Where words come out from the depth of truth,

Where tireless striving stretches its arms towards perfection,

Where the clear stream of reason has not lost its way

Into the dreary desert sand of dead habit,

Where the mind is led forward by Thee

Into ever-widening thought and action—

Into that heaven of freedom, my Father, let my country awake.

The Epidermis Enchanters

DR. GITARTHA BORUAH

PGT, Dept. of Dermatology - Jorhat Medical College, Jorhat

INTRODUCTION

As a dermatology postgraduate, I've seen fungal infections in places they should never be, chemical burns from kitchen remedies, and enough Google-based diagnoses to last a lifetime.

But nothing compares to the comic catastrophe created by online skincare “experts” who have extraordinary confidence, ordinary knowledge, and absolutely no qualifications.

Meet the trio who proudly call themselves The Epidermis Enchanters—a group whose influence is high, but whose understanding of skin is... exfoliated away.

THE CAST OF CHAOS

GlowRani – “Haldi Solves Everything”

Believes turmeric can fix acne, heartbreak, exam stress, and slow Wi-Fi.

PeelPrakash – “If It Burns, It Works”

Has exfoliated so much that his skin barrier seems ready to file a formal complaint.

SerumSundar – “Walking, Talking Chemical Peel” Uses 17 serums a day and shines brighter than the hostel corridor tube light.

Together, they run Dermatology Unlimited - yes, dermatology, with an extra “lo.”

The extra “lo” apparently stands for “low knowledge.”

EPISODE 1: THE CEMENT FACIAL FIASCO

Their viral “dermatologist-banned anti-ageing secret” involved:

Egg white + cold coffee + glue = Instant facelift

The hostel instantly transformed into a museum of frozen expressions.

- Smiling was impossible.
- Blinking was a dream.
- One boy sneezed and his mask shattered like a dry papad.

Instant facelift? More like instant face-freeze.

By evening, my OPD looked like a gathering of expressionless mannequins.

EPISODE 2: THE BEETROOT BLUSH APOCALYPSE

The next day they posted:

“Natural blush hack: Rub raw beetroot for 5 minutes.”

Students attended class looking like they had returned from a tomato-throwing festival.

- The biometric machine refused to recognise 12 people.
- A lecturer genuinely asked whether there was a cultural event.
- Someone tried washing it off and created a pink waterfall in the hostel sink.

Blush level: traffic signal.

EPISODE 3: THE SUNSCREEN SCANDAL

Their most ambitious disaster: “Stand near sunlight for 10 minutes. Your skin will memorize the sun. No sunscreen needed.”

Yes, apparently skin memory works better than mine during viva.

By afternoon, four students came to my OPD resembling freshly grilled paneertikka.

One asked,

“Sir, is it normal for my skin to smell roasted?”

SPF: Sunburned Paneer Fragment.

THE GRAND SHOWDOWN

Enough was enough.

I invited them for a “collaborative educational session.”

They arrived with ring lights, tripods, and confidence built on zero dermatology knowledge.

I asked a single basic question:

“What is the epidermis?”

GlowRani: “A perfume?”

Prakash: “A type of mushroom?”

Sundar: “Epi means epic... so epic skin?”

The audience laughed so hard that the AC made strange noises.

When influencers meet science, comedy happens.

I then explained real dermatology—pH, barrier repair, SPF, and why glue is not skincare.

THE REDEMPTION ARC

Surprisingly, they learned.

They rebranded to:

“Skinfluencers – Please DO NOT Try This at Home.”

Their new disclaimer now receives more likes than their posts.

Growth is realizing glue is not skincare.

CONCLUSION

As a dermatology postgraduate, I appreciate enthusiasm for skincare - but enthusiasm without education leads to:

- Cemented faces
- Beetroot disasters
- Sun-memorizing sunburns

So trust science, trust trained professionals, trust your skin -

And definitely avoid anyone who thinks the epidermis is a mushroom



NEIADVL NEWSLETTER

Volume: XXXI • December 2025

Official Mouthpiece of N. E. States Branch of IADVL

PHOTO GALLERY

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President



Dr. Swapan Majumder
Secretary

NEIADVL WORLD SKIN HEALTH & AWARENESS CAMPS









NEIADVL WORLD SKIN HEALTH & AWARENESS CAMPS DOCTORS LIST


SL. NO	VENUE	DOCTOR NAME	TOTAL NUMBER OF PATIENTS
1	BELABAR SLUM AREA AGARTALA	DR. SUJIT DEBBARMA	139
		DR. GAUTAM MAZUMDER	
		DR. NIRMALYA MALAKAR	
		DR. KAMAL DAS	
		DR. PRIYANKA DAS	
		DR. NANDITA BHATTACHARJEE	
2	APNA GHAR OLDAGE HOME AGARTALA	DR. SUJIT DEBBARMA	22
		DR. GAUTAM MAZUMDER	
		DR. NIRMALYA MALAKAR	
		DR. KAMAL DAS	
		DR. PRIYANKA DAS	
		DR. NANDITA BHATTACHARJEE	
3	NIVEDITA NARI SANGSTHA ORPHANAGE ,SILCHAR	DR. ARUP PAUL	
		DR. RIMJHIM SAHA	
		DR. SHROMONA KAR	
4	CENTRAL JAIL, SILCHAR.	DR. JOYDEEP ROY	
		DR. SANDIP ROY	
		DR. ANGSHUMAN BHATTACHARJEE	
5	NABHA PRABHAT (CHILD HOME),KETEKIBARI,TEZPUR	DR. FARHANA RAHMAN	26
		DR. PRIYANKA GOSWAMI	
6	CINNATOLIA ORPHANAGE HOME NORTH LAKHIMPUR	DR. TANAYA BHATTACHARYA	28
		DR. APARAJIT ROY	
		DR. SOUMYA JHA	
7	DA DAON ANATHASHRAM, BRAHMIN GAON, JORHAT	DR. MINAKSHI NARAH	73
		DR. KRISHNA TALUKDAR	
		DR. MOON DAS	
		DR. BALU HARIDAS	
		DR. HARMEET SINGH	
		DR. GITARTHA BARUAH	
8	SOS CHILDRENS VILLAGE, GUWAHATI	DR. NEIRITA HAZARIKA	95
		DR. MARY Z CHHANGTE	
		DR. SAKSHI	
		DR. MEGHNA DEVI	
9	ADINGIRI SEVA BHARATI JANAJATI HOSTEL & SANKARDEV SISHU NIKETAN, GUWAHATI	DR. DEBASHREE SAHOO	84
		Dr. AMLAN JYOTI SARMA	
		DR. BORNALI DUTTA	
		DR. ANUSHREE BAISHYA	
		DR. ABINAYA S	
		DR. GEETASHREE HALOI	
10	FATASIL AMBARI BASTI (HARIJANCOLONY), GUWAHATI	DR. MEHJABIN RAHMAN	
		DR. ANUSHIKHA JAIN	
		DR. V. THANGAM	
11	STATE HOME FOR WOMEN AND CHILDREN, NAGAON PANIGAONSOIALI,NAGAON,ASSAM	DR. ANKUR BISWAS	56
		DR. AMLAN JYOTI SARMA	
		DR. BONNYMA RONGPHARPI	
		DR. PADUM DEKA	

Cont...

NEIADVL WORLD SKIN HEALTH & AWARENESS CAMPS DOCTORS LIST

12	SENIOR CITIZEN HOME, BORDOLOI NAGAR, TINSUKIA, ASSAM	DR. KALYAN NATH	27
13	SHILLONG	DR. CLARIFY SYRTI	
		DR. JAGJEET SETHI	174
		DR. KALKAMBE SANGMA	
		DR. KARTHI KISHORE	
		DR. ABIGALI SYIEMLIEH	
		DR. R. VIGNESH	
14	PRAMOD TALUKDAR MEMORIAL OLD AGE HOME GUWAHATI	DR. DONBORLANG BYRSAT	
		DR. ANIMESH SARKAR	31
		DR. JOHN MEDHI	
		DR. JAHNAVI GOGOI	
15	TEZPUR CENTRAL JAIL, TEZPUR	DR. SMRITY BURAGOHAIN DAS	
		DR. SUNITA MECH	
16	SNEHALAYA CHILDRENS HOME, PALTAN BAZAR, GUWAHATI, ASSAM	DR. ASHOK KUMAR PRASAD	114
		DR. SALONI KATOCH	121
		DR. KN BARUA	
		DR. DAISY DEURI	
		DR. RABIUL HOQUE	
		DR. ARPITA YADAV	
17	KALYANASHRAM, DIBRUGARH	DR. NATASHA	
		DR. BIDISHA BARMAN	
		DR. SHYAMANTA BARUA	17
		DR. PAWAN BAJAJ	
18	PRERONA CHILDREN HOME, DIBRUGARH	DR. MALKEET SINGH	
		DR. PARASHABINA SHYAM	
		DR. SHYAMANTA BARUA	32
19	PUJA SHREE OLD AGE HOME, DIBRUGARH	DR. PAWAN BAJAJ	
		DR. MALKEET SINGH	
		DR. PARASHABINA SHYAM	
		DR. SHYAMANTA BARUA	40
		DR. DEEP PRAKASH PAUL	
		DR. ANINDITA BARUAH	
	GRAND TOTAL PATIENT	DR. TASNIM FATIMA	
		DR. AAKANKSHA	
		DR. PUSHPITA CHOUDHURY	
		DR. RAHUL BARMAN	
			1352


MEDIA COVERAGE



Echo of Arunachal
First Newspaper From The State
Established 20th Feb 1960

Experts caution on 'ill-equipped' dermatologists


GENERAL



Who is a certified Skin Specialist/Skin Expert Dermatologist?

DON'T GET FOOLED BY SKIN QUACKS!
10 common marketing tactics fake skin clinics use to trap you.


2,594



Issued in public interest

IADVL


Dentists are Dental Surgeons NOT Dermatologists



Experts warn against unsafe dermatological procedures

June 16, 2025

ITANAGAR, 15 Jun: Experts have expressed serious concern over the growing number of unqualified individuals offering unsafe dermatological and aesthetic procedures, and urged the public to seek treatment only from certified dermatologists.

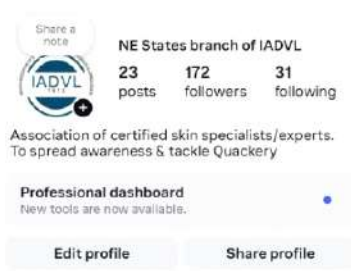


NE STATES NEWS
ARUNACHAL PRADESH

NORTH EAST BRANCH OF INDIAN ASSOCIATION OF DERMATOLOGISTS & LEPROLOGISTS (IADVL)

June 25, 2025

414




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NE States branch of IADVL

23 posts 172 followers 31 following

Association of certified skin specialists/experts. To spread awareness & tackle Quackery

Professional dashboard



chaloobserver.org

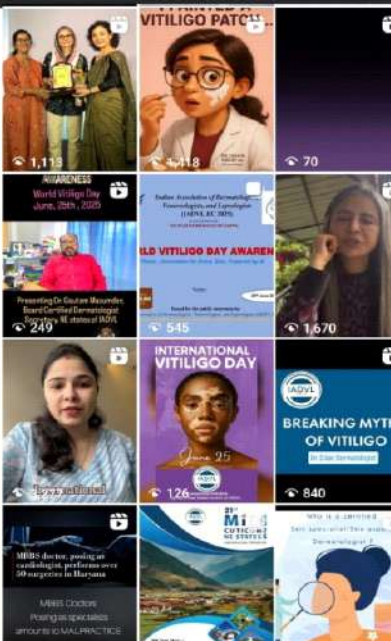
Arunachal hosts MIDCUTICON NE Conference | Experts warn against unqualified dermatologists

June 16, 2025

By Staff Reporter

ITANAGAR, Jun 15: Expressing serious concern over growing number of unqualified individuals offering unsafe dermatological and aesthetic procedures across the state, experts have urged the public to seek treatment only from certified dermatologists.

The caution was issued during 21st MIDCUTICON North East Conference held at Waii International



VITILIGO PATCHES

1,118

70

World Vitiligo Day June 25th, 2025

418

545

1,670

INTERNATIONAL VITILIGO DAY

126

840

BREAKING MYTHS OF VITILIGO

IADVL holds two skin health camps

Times News

Agartala, July 13: The Indian Association of Dermatologists, Venereologists & Leprologists (IADVL) conducted skin health awareness and consultation along with distribution of medicine at two camps in Agartala. With the theme "no health without skin health", the two camps were organized on the occasion of World Skin Health Day under the aegis of North East States Branch of Indian Association of Dermatologists Venereologists & Leprologists (NEIADVL). The camps were held at Belabar shauk and Anapghar Old Age Home. At Belabar, the team catered around 150 patients across all ages with free skin health consultation and sample



distribution. They also conducted skin health and hygiene awareness talks amongst the attendees. The other camp saw attendance of 50 people, with similar activities conducted by the team. The doctors who participated in the camps were Dr. Gautam Mazumder, Dr. Nirmalya Malakar, Dr. Kamal Das, Dr. Priyanka Das, Dr. Nandita Bhattacharya and Dr. Sujit Debbarma.

আইএডিভিএল-র বিনামূল্যে চর্মরোগ চিকিৎসা শিবির কাছাড়ে



পরিচালনা পরিষদ, ১৩ জুলাই: আইএডিভিএল-র উদ্যোগে আগরতলায় দুইটি বিনামূল্যে চর্মরোগ চিকিৎসা শিবির আয়োজিত করা হয়েছে। এই শিবিরে চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে জনসচেতনতা বৃদ্ধির উদ্দেশ্যে আয়োজিত করা হয়েছে। শিবিরে অংশগ্রহণকারীরা চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে আলোচনা করেছেন।

আইএডিভিএল-র চর্মরোগের চিকিৎসা শিবির কাছাড়ে

সংবাদ, আগরতলা, বৃহস্পতিবার, ১৩ জুলাই: আইএডিভিএল-র উদ্যোগে আগরতলায় দুইটি বিনামূল্যে চর্মরোগ চিকিৎসা শিবির আয়োজিত করা হয়েছে। এই শিবিরে চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে জনসচেতনতা বৃদ্ধির উদ্দেশ্যে আয়োজিত করা হয়েছে। শিবিরে অংশগ্রহণকারীরা চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে আলোচনা করেছেন।



শিবিরে অংশগ্রহণকারীদের সঙ্গে চিকিৎসকরা।

আইএডিভিএল-র চর্মরোগ চিকিৎসা শিবির কাছাড়ে

পরিচালনা পরিষদ, ১৩ জুলাই: আইএডিভিএল-র উদ্যোগে আগরতলায় দুইটি বিনামূল্যে চর্মরোগ চিকিৎসা শিবির আয়োজিত করা হয়েছে। এই শিবিরে চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে জনসচেতনতা বৃদ্ধির উদ্দেশ্যে আয়োজিত করা হয়েছে। শিবিরে অংশগ্রহণকারীরা চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে আলোচনা করেছেন।

শিবিরে অংশগ্রহণকারীদের সঙ্গে চিকিৎসকরা।

সংবাদ, আগরতলা, বৃহস্পতিবার, ১৩ জুলাই, ২০২৫ | ডিন | Page

চর্ম চিকিৎসা শিবির অনুষ্ঠিত

সংবাদ প্রতিনিধি, আগরতলা, ১৩ জুলাই: চর্ম রোগ ও কুষ্ঠ রোগ সহ নানা চর্ম রোগের উপর আলোচনা করা হয়েছে। এইসঙ্গে চর্ম চিকিৎসা এবং ওষুধ প্রদান করা হয়েছে। অনুষ্ঠিত হয়েছে চিকিৎসা শিবির। ১৩ জুলাই সারা দেশেই এই সংক্রান্ত কর্মসূচি পালন করা আয়োজিত ডার্মাটোলজিস্টস, ডেনেরিওলজিস্টস অ্যান্ড ল্যাপ্রোলজিস্টসের উদ্যোগে। র আগরতলা শহর সংলগ্ন বেলাবার গ্রাম পঞ্চায়েত এলাকায় এবং শহরের বড় এলাকাহীন অংশে বিনামূল্যে চিকিৎসা শিবির করা হয়েছে। শিবিরে দুইটি শিবিরে দুইশো জনের বেশি মানুষকে চিকিৎসা পরিষেবা সহ বিনামূল্যে ওষুধ বিতরণ করা হয়েছে। এই শিবিরে ডা. গৌতম মজুমদার, নির্মল্যা মালেকার, ডা. কমল দাস, ডা. প্রিয়ঙ্কা দাস, ডা. নন্দিতা ভট্টাচার্য্য, সুজিত দেবনাথ প্রমুখ অংশগ্রহণ করেন।

ন অফ ডার্মাটোলজিস্টস ডেনেরিওলজিস্টস অ্যান্ড ল্যাপ্রোলজিস্টসের ত্রিপুরা এলাকায়। — সংবাদচিত্র

বিশ্ব ভিটামিনে বাড়া ত্রিপুরার বিশিষ্ট চর্মরোগ বিশেষজ্ঞের

বিশ্ব ভিটামিনে বাড়া ত্রিপুরার বিশিষ্ট চর্মরোগ বিশেষজ্ঞের।

- চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে জনসচেতনতা বৃদ্ধির উদ্দেশ্যে আয়োজিত করা হয়েছে।
- শিবিরে অংশগ্রহণকারীরা চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে আলোচনা করেছেন।
- শিবিরে অংশগ্রহণকারীদের সঙ্গে চিকিৎসকরা।

IADVL-র উদ্যোগে আগরতলায় দুইটি বিনামূল্যে চর্মরোগ চিকিৎসা শিবির আয়োজিত করা হয়েছে। এই শিবিরে চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে জনসচেতনতা বৃদ্ধির উদ্দেশ্যে আয়োজিত করা হয়েছে। শিবিরে অংশগ্রহণকারীরা চর্মরোগের সঠিক চিকিৎসা এবং রোগের কারণ সম্পর্কে আলোচনা করেছেন।

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Bane of quackery in dermatology

DR SALONI KATOCH,
DR GAUTAM MAZUMDER,
DR SHYAMANTA BARUA

*Unqualified skin treatments risk lives,
demand urgent regulation.*

A burnt face, an infected tattoo, permanent skin damage, internal complications, delayed diagnoses, and even death are on the rise due to the growing menace of unqualified individuals offering treatments for skin, hair, and cosmetic dermatology issues.

A harmless red blush on one's cheek may actually be a sign of an auto-immune skin disease, or hair loss may indicate thyroid issues or nutritional deficiencies. A long-standing boil may be skin tuberculosis, and that odd-looking mole may turn out to be cancerous. Diagnosing and treating skin concerns and diseases requires in-depth knowledge and analysis of the physiology and pathology of our largest organ, along with its correlation to other systems in the human body.

This is why a qualified skin specialist spends five and a half years completing an MBBS degree, followed by a rigorous 2-3 year postgraduate specialization in Dermatology, Venereology, and Leprosy.

A hyperpigmented brown patch on the face, when treated with serums, peels, and lasers by an unqualified individual, may actually be an autoinflammatory skin disorder requiring medical treatment. This is exactly why the general public needs to be more skin-aware.

The Hon'ble Supreme Court of India has held that, "A person who does not have knowledge of a particular system of medicine but practices in that system is a quack and a mere pretender to medical knowledge or skill, or to put it differently, a charlatan."

As per the National Medical Commission (NMC) Act, 2023, skin, hair, and nail care fall solely under the purview of certified dermatologists. Despite rules and regulations, many non-dermatologist doctors and unqualified practitioners pose as skin experts or specialists, using misleading terms like Cosmetologist, Aesthetic Physician, Aesthetic Medicine, etc. – none of which are recognized by any regulatory authority.

Many unqualified individuals operate clinics under labels like "Skin," "Hair," "Laser," and "Aesthetic Dermatology" without the requisite medical qualifications in dermatology, amounting to misrepresentation of facts and misleading the general public.

The Ministry of Health and Family Welfare, in an RTI

response dated May 2023, clearly stated that the minimum qualification required to perform a laser hair reduction procedure is an MD in Dermatology. Despite this, the medical-grade procedure – associated with potential complications like burns and scarring – is being carried out in unqualified centres without a dermatologist.

Patients need to be vigilant. They should check the degrees of their treating skin expert, which must be clearly mentioned on prescriptions, along with the Medical Council registration number. The only degrees recognized by law in India for a dermatologist/skin expert/skin specialist are MD, DNB, or DVD in Dermatology.

Public ignorance also fuels this problem. Many patients prefer visiting their neighbourhood pharmacy, where they are handed an "all-in-one" cream – mostly containing potent steroids mixed with other ingredients – that can cause life-threatening systemic complications if used for prolonged durations.

Similarly, many quacks prescribe topical steroids as magic creams for everything, from skin brightening to fungal infections. Oral steroids and steroid injections are also irresponsibly dispensed as "wonder drugs." Unfortunately, by the time the patient reaches a certified skin expert, months or even years of drug misuse and abuse have passed, often resulting in severe side effects.

Another growing concern is the group of patients influenced by skin trends, social media influencers, aggressive marketing, false promises, and attractive cosmetic packages – disguised as cosmetology, wellness, or aesthetics.

We also call for strict action from respective medical and dental councils against doctors violating the code of ethics and indulging in malpractice. Hospitals and clinics must also follow ethical practices by employing certified dermatologists in their skin and cosmetic dermatology departments.

Strict regulations need to be implemented and enforced by the government, especially regarding the dispensing of Schedule H drugs like steroids by pharmacists and the unregulated sale of dermatology lasers to unqualified individuals and centres. This article is an awareness initiative by the North East States Branch of the Indian Association of Dermatologists, Venereologists and Leprologists (NEIADVL).

MEETINGS & ADMINISTRATION



AGARTALA CHAPTER



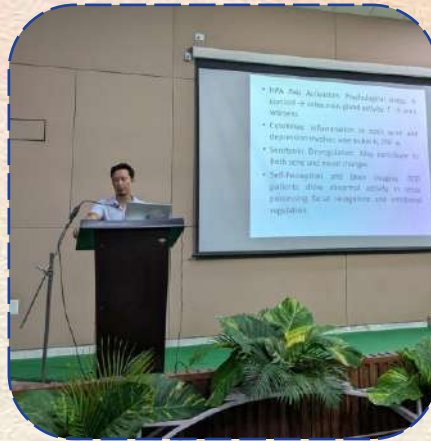
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VITILIGO

Glimpses of Poster making competition by the talented students of Silchar Medical College & Hospital, Silchar on World Vitiligo Day'25



*In the canvas of our skin, vitiligo paints a collage of courage—
reminding us that true beauty blooms in the spaces where
light and shadow dance unafraid.*





30

**GLORIOUS YEARS IN
DERMATOLOGY**

