

MINISTRY OF AYUSH COMPILED MEDIA REPORT
12 Dec, 2024 - 16 Dec, 2024

 **Total Mention 14**

|  Print | Financial | Mainline | Regional | Periodical |
|------------------------------------------------------------------------------------------|-----------|----------|----------|------------|
| 14 | 6 | 3 | 5 | N/A |
|  Online | | | | |
| N/A | | | | |

 Print

| No | Newspaper | Headline | Edition | Pg |
|-----|---------------------------|-----------------------------------------------------------------------------------------------|---------------|----|
| 1. | Business Standard | Stock in the news | Mumbai | 2 |
| 2. | Business Standard | STOCKS IN THE NEWS | Chennai + 1 | 2 |
| 3. | Business Standard | Centre ramps up enrolment of 70 + in Ayushman Bharat | Chennai | 4 |
| 4. | Business Standard | Centre ramps up enrolment of 70+ in Ayushman Bharat | Kochi | 4 |
| 5. | Business Standard | Centre ramps up enrolment of 70+ in Ayushman Bharat | Bengaluru + 3 | 4 |
| 6. | Business Standard (Hindi) | Khabro mai rahe stock | Delhi | 2 |
| 7. | The Indian Express | Healthcare, more responsive | Ahmedabad + 1 | 8 |
| 8. | The New Indian Express | Rs 35 crore corpus fund for rare medical treatment for SCs, STS | Bengaluru | 7 |
| 9. | The New Indian Express | SHAHI JEERA : A WONDER SPICE | Chennai | 14 |
| 10. | Ajit | Ayushman bharat digital mission te nuras ate pera medical staff layi sikhlayi da kita aayojan | Chandigarh | 7 |
| 11. | Punjab Kesari | Ayushman bharat digital mission par nurse Pera medical staff ke liye prashikshan aayojit | Chandigarh | 5 |
| 12. | Punjab Kesari | Ayushmann yojana :70 saal se jayda umar ke 8 hazaar bujurgo ka ragistration | Chandigarh | 6 |
| 13. | Maharashtra Times | One Health means integrated health. | Pune | 8 |
| 14. | Divya Bhaskar | Exercise increases the effect of insulin for 24 hours | Mumbai | 4 |

Business Standard • 13 Dec • Ministry of Ayush

Stock in the news

2 • PG

94 • Sqcm

47241 • AVE

101.93K • Cir

Top Left

Mumbai



Business Standard • 13 Dec • Ministry of Ayush
STOCKS IN THE NEWS

2 • PG

89 • Sqcm

8864 • AVE

27.82K • Cir

Top Center

Chennai • Bengaluru



Business Standard • 12 Dec • Ministry of Ayush Centre ramps up enrolment of 70 + in Ayushman Bharat

4 • PG

314 • Sqcm

31420 • AVE

27.82K • Cir

Bottom Center

Chennai

Centre ramps up enrolment of 70+ in Ayushman Bharat

BJP also stepping in to help as only 4% of beneficiaries have been onboarded in over a month after scheme was launched

SANKET KOUL
New Delhi, 11 December

After over one month since the launch of the expanded Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) to provide insurance cover to those aged 70 and above, the Centre is using enrolment drives and IEC (Information, Education, and Communication) campaigns, along with some help from the ruling Bharatiya Janata Party (BJP)'s machinery, for adding beneficiaries under the scheme.

This comes as over 2.68 million Ayushman Bharat Vaya Vandana cards have been issued since the scheme's launch to date, with the number making up for a modest 4.47 per cent achievement of the Centre's estimate of 60 million eligible beneficiaries under the scheme.

In Ghaziabad and Gautam Buddh Nagar districts of Uttar Pradesh (UP), several BJP functionaries have started enrolment camps. Messages inviting residents of various housing societies in

Ghaziabad for medical camps and Ayushman enrolment via mobile phones have started doing rounds on WhatsApp.

One such invitation by a district BJP functionary in Ghaziabad asks residents to attend a free "Ayushman-cum-dental checkup camp", with Aadhaar cards and mobile numbers linked to the card.

A similar sight could be seen in north Mumbai's Mulund, with local BJP leaders leading the charge. In a post on social media app X, Mihir Kotecha, BJP MLA from Mulund, shared that his team had registered over 1,000 senior citizens aged 70 or above in three days of a special camp.

"The registrations would go on in my office till January 15, to cover almost 35,000 eligible beneficiaries living in the assembly constituency," posts on his X timeline stated.

While the BJP machinery's involvement in reaching out to beneficiaries was also seen during this year's general election campaign, the NHA (National Health Authority) is now working to create

UNDER COVERAGE

PMJAY registrations for 70+ (in mn)



*Number of citizens aged 70 and above in India estimated by Govt during scheme's launch
Sources: National Health Authority, PMJAY dashboard



awareness among senior citizens for the expanded AB-PMJAY scheme.

Responding to queries regarding ways of implementation for the scheme, the NHA told Business Standard that it is working in collaboration with the State Health Agencies (SHAs) to ensure all senior citizens eligible for the Ayushman Vaya Vandana card are registered.

"Besides this, the Ayushman application or web

portal enabled with self-verification feature is helping the elderly register for Ayushman Vaya Vandana card using mobile phones within the comforts of their home," the NHA added.

Experts believe that the initial slowness in pace can be due to the scheme being just one month old, with the rate expected to pick up from the announcement of fresh allocation under the Union Budget in February next year. A public health expert,

who did not want to be named, highlighted that there remains a need for outreach initiatives, simplified processes, and localised efforts to bridge gaps in awareness and accessibility.

"Empowering communities with information and support will be critical to unlocking the full potential of this transformative initiative," he added. On the other hand, hospitals empanelled under AB-PMJAY say that the

modest rate can be due to the scheme being in early stages of implementation, and that there have been concerns about the reimbursement process for empanelled hospitals in the expanded scheme of things.

Commenting on the same, Giridhar Gyani, director general, Association of Healthcare Providers of India (AHPI), said that delay in claims settlement has created some operational challenges for healthcare providers, affecting the smooth functioning of services under the overall scheme.

"It may be quite early for the industry to suggest any steps to the government or NHA as it has been only one month, but we can see some advocacy in the form of consortiums or dialogues among the industry," Gyani added.

The hospital body would urge the government and the NHA to streamline the claims process to ensure timely reimbursements, which will support hospitals in maintaining the quality of care.

Business Standard • 12 Dec • Ministry of Ayush
Centre ramps up enrolment of 70+ in Ayushman Bharat

4 • PG

236 • Sqcm

20063 • AVE

15.91K • Cir

Bottom Center

Kochi

Centre ramps up enrolment of 70+ in Ayushman Bharat

BJP also stepping in to help as only 4% of beneficiaries have been onboarded in over a month after scheme was launched

SANKET KHUL
New Delhi, 11 December

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UNDER COVERAGE

PMJAY registrations for 70+ (in mn)

60

70+ population*

2.68

Total registrations



*Number of citizens aged 70 and above in India estimated by Govt during scheme's launch
Sources: National Health Authority, PMJAY dashboard



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Business Standard • 12 Dec • Ministry of Ayush Centre ramps up enrolment of 70+ in Ayushman Bharat

4 • PG

304 • Sqcm

62232 • AVE

33.2K • Cir

Bottom Center

Bengaluru • Delhi • Jaipur • Chandigarh

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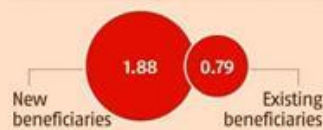
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Business Standard (Hindi) • 13 Dec • Ministry of Ayush

Khabro mai rahe stock

2 • PG

263 • Sqcm

59193 • AVE

26.42K • Cir

Top Left

Delhi



The Indian Express • 13 Dec • Ministry of Ayush
Healthcare, more responsive

8 • PG

1254 • Sqcm

608150 • AVE

249.64K • Cir

Top Center

Ahmedabad • Pune

Healthcare, more responsive



K SUJATHA RAO

Universal Health Coverage should be about systems that guarantee care, not just building medical centres

IS UNIVERSAL HEALTH Coverage (UHC) a realistic aspiration for India? Underpinning UHC is the precept that every human being is worthy of living in good health and dignity. Unlike European countries and despite our intellectual traditions, such ideas of equality have failed to get political traction. Our society and polity remain fractured and unequal. But then, if we do not believe in these basic ideas to define us as a society, we need to ask ourselves what values should drive our politics. This is critical since health is politics and an arena of contesting and competing interests. Actualising the aspiration of UHC would require a political system that values equality and justice as a core tenet.

Pursuing the goal of UHC would require undertaking a set of policy actions in tandem. One, doubling health funding to bridge the resource gap for comprehensive community-based primary healthcare. Two, ensuring universal access to social health determinants — nutrition, safe water and environmental hygiene, income and education. Three, making sure that human resources deployed at different levels of care are appropriately trained, skilled and governed to carry out their tasks. Four, putting in place incentive structures that hold health providers accountable to the people they serve. Five, improving governance and oversight of the private sector.

In other words, strengthening the health system's foundations is not only about building health centres. It is about establishing systems that guarantee care as per need and an actively interventionist state with the capacity to enforce laws, rules and regulations to protect patients from the imperfect market that characterises the health sector.

Given the paucity of budgetary resources, India has done relatively well. Several communicable diseases have been either eradicated or controlled. Maternal mortality and infant mortality have also shown impressive reduction. The reduction in communicable diseases (which continue to disproportionately rage in the northern states) means that 60 per cent of mortality now is due to non-communicable diseases — the four leading causes being cardiac ailments, cancers, COPD and diabetes. These diseases are expensive to treat and require longitudinal attention. They

are the results of sedentary lifestyles, rapid urbanisation, shifts in dietary habits — increased intake of junk foods, alcohol, tobacco and other addictive substances — and the ageing of the population.

The implication for the health system is substantive: Revamp itself to shift from episodic to long-term care. Such revamping would require resilience, different skill sets and functioning within an accountability framework to ensure the continuum of care. Since the causal factors are modifiable, appropriate laws, regulations, public health policies and a community-based primary healthcare system, run by family doctors and public health specialists, would be required. Countries have shown that such investment in primary healthcare has helped avert hospitalisations by one-third. As hospitals are expensive, this is savings in real terms.

India's Ayushman Bharat programme consists of two components — one, the strengthening of primary care facilities by better availability of drugs and human resources for providing 12 services free of cost; and two, insuring 50 crore poor persons for Rs 5 lakhs sum assured. This is indeed a welcome initiative. Yet, the general perception is that the health system is too costly, too privatised and lacks a strong foundation. Considering our achievements have been impressive, why this perception? I offer some reasons.

One, India's public spending has, for the last seven decades, been an average of about 1 to 1.2 per cent of GDP, going up to 1.3 per cent at best — the WHO norm is 3 per cent. Such low public funding means that the functioning of public facilities is suboptimal and despite the impressive government social health insurance programs for hospitalisation, out-of-pocket expenditures continue to range between 45-54 per cent of the total health spending, against the SDG goal of 20 per cent. Two, a messed up human resource planning with lopsided incentive structures and the non-availability of appropriately trained and skilled personnel. Vacancies at all levels continue to plague the system. For example, in the Community Health Centers with 30 beds located to serve 1 lakh population, the vacancy level of specialists is 80 per cent, forcing people to seek private care, in-

curred huge expenditures, or going to district hospitals, overcrowding them in the process. Why does the decades-old norm of posting specialists at CHCs not get reviewed since the model does not seem workable?

Three, India's health delivery system comprises both the public and private sectors. The private sector *per se* is not the problem. Of concern is the emerging trend towards corporatisation, commercialisation and profiteering, resulting in excessive diagnostics and unnecessary surgeries. The huge capital investment required to establish tertiary hospitals is increasingly being mobilised from equity and venture capital that demand a minimum 25 per cent return on investment. Many corporate hospitals, that provide nearly half of tertiary care in India, are being steadily bought up by foreign investment companies — Black Rock, for example, has majority control in the Manipal group. As a result, the cost of care is getting steep.

The government is further narrowing space for middle-class people to avail free or highly subsidised care by leasing/selling off district hospitals (about 30 currently) to investors or corporates on conditions such as free treatment to the poor — something that the government does not have the capacity to enforce.

The situation is indicative of a state abdicating its responsibility to govern and reflects an ideological vacuum. Understanding UHC as merely provisioning of health insurance is flawed: What use are the vouchers if there is inadequate supply or poor quality provisioning of services? What is needed is for the state to do the hard stuff — invest in health, provide good governance and build the capacity to enforce laws, regulations, rules and contracts. UHC is a goal that today's India can aspire for only if the state can govern and align its politics for power with people's welfare. The question and challenge for democratic societies are how to bring change in an environment where people's aspirations are low and the political system is able to get away with doles and not be held accountable. That is the key and the concern.

The writer is former health secretary, Government of India

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The New Indian Express • 15 Dec • Ministry of Ayush
Rs 35 crore corpus fund for rare medical treatment for SCs, STS

7 • PG

357 • Sqcm

303358 • AVE

177.8K • Cir

Middle Left

Bengaluru

₹35 crore corpus fund for rare medical treatment for SCs, STs

EXPRESS NEWS SERVICE

@ Bengaluru

THE Karnataka government approved the creation of a Rs 35-crore corpus fund to provide rare medical treatments for people belonging to the Scheduled Castes (SC) and Scheduled Tribes (ST).

This initiative is intended to address the financial burden of high-cost treatments. The fund will be managed through the Suvarna Arogya Suraksha Trust (SAST) and will prioritise treatments not covered under existing State and Union government health schemes.

Initially, the Social Welfare Department was tasked with implementing the budget provision. However, the responsi-

bility was later transferred to the Department of Health and Family Welfare after discussions chaired by the Chief Minister.

The corpus fund will focus on addressing treatment needs for rare and expensive diseases by utilising interest generated from the allocated amount. The government revised the allocation under the SCSP/TSP budget to Rs 47 crore, ensuring sufficient resources to sustain the initiative.

A total of 33 rare and high-cost treatments were initially included under the scheme. However, 16 were later excluded as they are already covered by programmes such as Ayush-

man Bharat – Arogya Karnataka and the National Policy for Rare Diseases (NPRD). The revised scheme will now support 17 treatments exclusively for SC/ST patients.

The government emphasised that if any of the approved treatments are included in broader state or national schemes in the future, they will be removed from the corpus fund's scope to avoid duplication of benefits.

The scheme will continue under the guidance of the existing technical and executive committees, which will oversee its implementation and develop additional guidelines for rare and costly treatments.



The New Indian Express • 13 Dec • Ministry of Ayush

SHAHI JEERA : A WONDER SPICE

14 • PG

794 • Sqcm

793562 • AVE

246.4K • Cir

Top Center

Indulge

Chennai



**mind
&
body**

wellness/week ahead

Boost digestion, curb hunger, and support weight loss with *Shahi jeera* that is loaded with essential nutrients

SHAHI JEERA: A WONDER SPICE



INDULGE
THE NEW INDIAN EXPRESS
FRIDAY, DECEMBER 13, 2024 | CHENNAI

DO YOU FIND yourself constantly hungry or struggling to shed those extra kilos despite your best efforts? The answer might lie in a humble ingredient from the Indian kitchen caraway seeds, also known as *shahi jeera*. This ancient wonder spice not only adds flavour to your meals but also offers a host of health benefits, including weight loss and appetite suppression. *Shahi jeera* is a medicinal plant known for its aromatic flavour and health-boosting properties. These tiny seeds pack a punch when it comes to nutrients and therapeutic compounds, making them a versatile ingredient in traditional and modern kitchens alike.

Shahi jeera is loaded with essential nutrients that contribute to overall health and well-being, like fibre that helps you feel full for longer, reducing overeating and aiding digestion. It's a rich source of iron, magnesium, copper, and calcium, which are vital for energy, bone health, and overall body function. *Shahi jeera* contains limonene and carvone, powerful compounds that fight free radicals. Along with these benefits, let's look at a few other as well:

- One of the most remarkable benefits of *shahi jeera* is its ability to support weight loss. The fiber in the seeds helps suppress your appetite, keeping hunger pangs at bay. By making you feel full for longer, it reduces the chances of overeating, making it easier to manage your calorie intake.
- *Shahi jeera* has long been used as a remedy for digestive issues. It helps reduce bloating, indigestion, and even phlegm. The essential oils in the seeds promote healthy gut function and can aid in managing conditions like H. Pylori infections, gut inflammation, ulcers etc.
- The antioxidants in *shahi jeera*, such as limonene and carvone, fight inflammation and oxidative stress, which are linked to various chronic diseases. By neutralising harmful free radicals, these compounds help your body stay healthier for longer.
- For those struggling with low iron levels, *shahi jeera* is a natural source of this essential mineral. Iron is crucial for maintaining energy levels and supporting red blood cell production, making it a great addition to your diet.
- The essential oils in *shahi jeera* have anti-inflammatory properties that can alleviate discomfort from various conditions, making it a gentle, natural remedy for inflammation-related issues.

To get the above benefits from this mighty seeds, let's add *shahi jeera* to your food with rice, curries, or soups. Its aromatic taste enhances dishes while offering health benefits. You can even steep a teaspoon of *shahi jeera* in hot water for 10 mins for a soothing tea that aids digestion and curbs appetite. If you are looking at weight loss, then lightly roast the seeds and sprinkle them over salads or roasted foxnuts/jowar puffs etc for an extra crunch and flavour.

Shahi jeera is more than just a spice — it's a natural remedy that can help you manage hunger, lose weight, and improve digestion. Packed with fibre, various essential minerals, and antioxidants, these seeds offer a simple yet powerful way to enhance your health. With a balanced diet, regular exercise, and *shahi jeera* in moderation on your side, your wellness goals are just a step away!

HEALTHY LIVING
DEEPIKA RATHOD
Chief Nutrition Officer, Luke Coutinho Holistic Healing Systems. The writer is a clinical nutritionist with a focus on healthy lifestyle choices.



Ajit • 16 Dec • Ministry of Ayush

Ayushman bharat digital mission te nuras ate pera medical staff layi sikhlayi
da kita aayojan

7 • PG

279 • Sqcm

265312 • AVE

1.06M • Cir

Middle Right

Chandigarh

ਆਯੁਸ਼ਮਾਨ ਭਾਰਤ ਡਿਜੀਟਲ ਮਿਸ਼ਨ 'ਤੇ ਨਰਸਾਂ ਅਤੇ ਪੈਰਾ-ਮੈਡੀਕਲ ਸਟਾਫ ਲਈ ਸਿਖਲਾਈ ਦਾ ਕੀਤਾ ਆਯੋਜਨ

ਪੰਚਕੂਲਾ, 15 ਦਸੰਬਰ (ਕਪਿਲ)- ਸਿਹਤ ਅਤੇ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ ਦੇ ਅਧੀਨ ਸਥਿਤ ਸਟੇਟ ਇੰਸਟੀਚਿਊਟ ਆਫ਼ ਹੈਲਥ ਐਂਡ ਫੈਮਿਲੀ ਵੈਲਫੇਅਰ ਵਿਖੇ ਆਯੁਸ਼ਮਾਨ ਭਾਰਤ ਡਿਜੀਟਲ ਮਿਸ਼ਨ (ਏ.ਬੀ.ਡੀ.ਐਮ.) ਦੀ ਅਗਵਾਈ ਹੇਠ ਇਕ ਵਿਸ਼ੇਸ਼ ਸਿਖਲਾਈ ਸੈਸ਼ਨ ਦਾ ਆਯੋਜਨ ਕੀਤਾ ਗਿਆ। ਇਸ ਪ੍ਰੋਗਰਾਮ ਦਾ ਆਯੋਜਨ ਏ. ਬੀ. ਡੀ. ਐਮ. ਕੋਆਰਡੀਨੇਸ਼ਨ ਪੀ. ਐਮ. ਯੂ. ਟੀਮ ਦੁਆਰਾ ਰਾਜ ਪੱਧਰ 'ਤੇ ਨਰਸਾਂ ਅਤੇ ਪੈਰਾ-ਮੈਡੀਕਲ ਸਟਾਫ ਲਈ ਆਯੁਸ਼ਮਾਨ ਭਾਰਤ ਡਿਜੀਟਲਾਈਜ਼ੇਸ਼ਨ ਯਤਨਾਂ ਨੂੰ ਤੇਜ਼ ਕਰਨ ਦੇ ਉਦੇਸ਼ ਨਾਲ ਕੀਤਾ ਗਿਆ ਸੀ। ਪ੍ਰੋਗਰਾਮ ਦੀ ਸ਼ੁਰੂਆਤ ਸੰਯੁਕਤ ਡਾਇਰੈਕਟਰ ਡਾ. ਕੀਰਤੀ ਵਲੋਂ ਸੁਆਗਤੀ ਭਾਸ਼ਣ ਨਾਲ ਕੀਤੀ ਗਈ।

ਸਿਹਤ ਖੇਤਰ 'ਚ ਡਿਜੀਟਲਾਈਜ਼ੇਸ਼ਨ ਦੀ ਲੋੜ 'ਤੇ ਜ਼ੋਰ ਦਿੰਦੇ ਹੋਏ, ਉਸ ਨੇ ਕਿਹਾ ਕਿ ਆਯੁਸ਼ਮਾਨ ਭਾਰਤ ਡਿਜੀਟਲ ਮਿਸ਼ਨ ਦੁਆਰਾ ਸਿਹਤ ਸੰਭਾਲ ਦਾ ਡਿਜੀਟਲੀਕਰਨ ਨਾ ਸਿਰਫ਼ ਇਲਾਜ ਦੀ ਪ੍ਰਕਿਰਿਆ ਨੂੰ ਵਧੇਰੇ ਪ੍ਰਭਾਵਸ਼ਾਲੀ ਬਣਾਏਗਾ, ਸਗੋਂ ਮਰੀਜ਼ ਅਤੇ ਸੇਵਾ ਪ੍ਰਦਾਤਾ

ਵਿਚਕਾਰ ਸੰਚਾਰ ਨੂੰ ਵੀ ਸਰਲ ਅਤੇ ਪਾਰਦਰਸ਼ੀ ਬਣਾਏਗਾ। ਇਸ ਤੋਂ ਬਾਅਦ, ਵਿਸ਼ਾਲ ਚੁੰਘ, ਪ੍ਰਾਜੈਕਟ ਮੈਨੇਜਰ, ਨੇ ਏਬੀਡੀਐਮ ਦੇ ਮੁੱਖ ਭਾਗਾਂ ਬਾਰੇ ਸਿਖਲਾਈ ਦਿੱਤੀ। ਉਸਨੇ ਡਿਜੀਟਲ ਹੈਲਥ ਆਈਡੀ, ਹੈਲਥਕੇਅਰ ਪ੍ਰੋਫੈਸ਼ਨਲਜ਼ ਅਤੇ ਸੁਵਿਧਾ

ਪੱਧਰ ਤੱਕ ਲਿਜਾਣ ਅਤੇ ਉਨ੍ਹਾਂ ਦੀ ਗੁਣਵੱਤਾ 'ਚ ਸੁਧਾਰ ਕਰਨ ਦਾ ਇੱਕ ਮਹੱਤਵਪੂਰਨ ਸਾਧਨ ਹਨ। ਇਸ ਟਰੇਨਿੰਗ ਰਾਹੀਂ ਭਾਗੀਦਾਰਾਂ ਨੂੰ ਏ.ਬੀ.ਡੀ.ਐਮ. ਦੇ ਕੰਪੋਨੈਂਟਸ ਬਾਰੇ ਵਿਸਥਾਰਪੂਰਵਕ ਜਾਣਕਾਰੀ ਦਿੱਤੀ ਗਈ ਅਤੇ ਉਨ੍ਹਾਂ ਨੂੰ



ਸਿਹਤ ਅਤੇ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ ਦੇ ਅਧੀਨ ਸਥਿਤ ਸਟੇਟ ਇੰਸਟੀਚਿਊਟ ਆਫ਼ ਹੈਲਥ ਐਂਡ ਫੈਮਿਲੀ ਵੈਲਫੇਅਰ ਵਿਖੇ ਆਯੁਸ਼ਮਾਨ ਭਾਰਤ ਡਿਜੀਟਲ ਮਿਸ਼ਨ (ਏ.ਬੀ.ਡੀ.ਐਮ.) ਦੀ ਅਗਵਾਈ 'ਚ ਵਿਸ਼ੇਸ਼ ਸਿਖਲਾਈ ਸੈਸ਼ਨ ਦੌਰਾਨ ਟ੍ਰੇਨਿੰਗ ਦਿੰਦੇ ਹੋਏ।

ਤਸਵੀਰ : ਕਪਿਲ

ਰਜਿਸਟਰੀ, ਅਤੇ ਹੈਲਥ ਐਕਸਚੇਂਜ ਪਲੇਟਫਾਰਮ ਵਰਗੇ ਨਾਜ਼ੁਕ ਹਿੱਸਿਆਂ ਬਾਰੇ ਜਾਣਕਾਰੀ ਪ੍ਰਦਾਨ ਕੀਤੀ। ਡਾ. ਅੰਕਿਤ ਸ਼ਰਮਾ, ਸਮਰੱਥਾ ਨਿਰਮਾਣ ਅਫਸਰ ਨੇ ਮਾਈਕ੍ਰੋਸਾਈਟਸ ਅਤੇ ਉਨ੍ਹਾਂ ਦੀ ਮਹੱਤਤਾ ਬਾਰੇ ਚਾਨਣਾ ਪਾਇਆ। ਉਨ੍ਹਾਂ ਕਿਹਾ ਕਿ ਮਾਈਕ੍ਰੋਸਾਈਟਸ ਸਿਹਤ ਸੇਵਾਵਾਂ ਨੂੰ ਹੇਠਲੇ

ਡਿਜੀਟਲਾਈਜ਼ੇਸ਼ਨ ਨਾਲ ਸਬੰਧਤ ਨਵੀਆਂ ਤਕਨੀਕਾਂ ਦੀ ਵਰਤੋਂ ਦਾ ਪ੍ਰੈਕਟੀਕਲ ਗਿਆਨ ਵੀ ਪ੍ਰਦਾਨ ਕੀਤਾ ਗਿਆ। ਇਹ ਪਹਿਲਕਦਮੀ ਨਰਸਾਂ ਅਤੇ ਪੈਰਾ-ਮੈਡੀਕਲ ਸਟਾਫ ਨੂੰ ਡਿਜੀਟਲਾਈਜ਼ੇਸ਼ਨ ਰਾਹੀਂ ਵਧੇਰੇ ਕੁਸ਼ਲਤਾ ਨਾਲ ਸੇਵਾਵਾਂ ਪ੍ਰਦਾਨ ਕਰਨ ਦੇ ਯੋਗ ਬਣਾਵੇਗੀ।

Punjab Kesari • 16 Dec • Ministry of Ayush

Ayushman bharat digital mission par nurse Pera medical staff ke liye prashikshan aayojit

5 • PG

129 • Sqcm

119747 • AVE

867.98K • Cir

Middle Right

Chandigarh

आयुष्मान भारत डिजीटल मिशन पर नर्सों और पैरा-मैडीकल स्टाफ के लिए प्रशिक्षण आयोजित

पंचकूला, 15 दिसम्बर (मुकेश):
स्वास्थ्य और परिवार कल्याण विभाग
के अंतर्गत स्थित राज्य स्वास्थ्य और
परिवार कल्याण संस्थान में आयुष्मान
भारत डिजिटल मिशन के तत्वावधान
में एक विशेष प्रशिक्षण सत्र आयोजित
किया गया। यह कार्यक्रम को-
ऑर्डिनेशन पी.एम.यू. टीम द्वारा राज्य
स्तर पर नर्सों और पैरा-मैडीकल
स्टाफ को आयुष्मान भारत
डिजिटलीकरण के प्रयास को गति
 देने के उद्देश्य से आयोजित किया
 गया। कार्यक्रम का शुभारंभ डॉ.
कीर्ति, संयुक्त निदेशक, द्वारा स्वागत
भाषण के साथ हुआ। उन्होंने स्वास्थ्य
क्षेत्र में डिजिटलीकरण की
आवश्यकता पर बल देते हुए कहा
कि, आयुष्मान भारत डिजिटल मिशन
के माध्यम से स्वास्थ्य सेवा का
डिजिटलीकरण न केवल उपचार
प्रक्रिया को अधिक प्रभावी बनाएगा,
बल्कि रोगी और सेवा प्रदाता के बीच
संवाद को भी सरल और पारदर्शी
बनाएगा। इसके बाद विशाल चुध,
प्रोजेक्ट मैनेजर ने प्रमुख घटकों पर
प्रशिक्षण दिया।

Punjab Kesari • 13 Dec • Ministry of Ayush

Ayushmann yojana :70 saal se jayda umar ke 8 hazaar bujurgo ka
ragistration

6 • PG

593 • Sqcm

548641 • AVE

867.98K • Cir

Top Left

Chandigarh

आयुष्मान योजना : 70 साल से ज्यादा उम्र के 8 हजार बुजुर्गों का रजिस्ट्रेशन

योजना को सुविधाजनक बनाने के लिए शहर भर में 27 शिविर लगाए जाने पर विचार 40,000 वरिष्ठ नागरिक

चंडीगढ़, 12 दिसम्बर (पाल): सितंबर में केंद्र सरकार ने 70 साल और इससे ऊपर के लोगों को आयुष्मान स्कीम के तहत सुविधा देने की योजना को मंजूरी दी थी, जिसे लेकर शहर में 70 साल और इससे ऊपर के लोगों को जोड़ने के लिए हैल्थ विभाग योजना बना रहा है। इस योजना के तहत माध्यमिक और तृतीयक देखभाल अस्पताल में भर्ती के लिए हर साल 5 लाख रुपए तक का इलाज मुफ्त में दिया जाता है।

हैल्थ डायरेक्टर डॉ. सुमन सिंह की मानें तो इस आयु उम्र के लोगों की जरूरतें अलग हैं, उम्र से संबंधित स्वास्थ्य स्थितियों, पुरानी बीमारियों की चपेट में आने और महंगे इलाज के कारण खास देखभाल की जरूरत है। विभाग ने चंडीगढ़ के वरिष्ठ नागरिकों के लिए कार्ड बनाने की प्रक्रिया शुरू कर दी है। चंडीगढ़ में हमारे पास लगभग 40,000 वरिष्ठ नागरिक हैं और अब तक, हमने करीब 8,000 लोगों का रजिस्ट्रेशन कर लिया है।

विभाग ने शहर भर में 27 कैंप लगाने की योजना बनाई

डॉ. सिंह ने बताया कि ज्यादा से ज्यादा लोगों को इससे जोड़ने के लिए विभाग शहर भर में 27 कैंप लगाने की



योजना बनाई गई है। जो शहर के अलग-अलग ऐसे एरिया में होंगे, जहां सुविधा थोड़ी कम है। स्वास्थ्य और परिवार कल्याण मंत्रालय के मुताबिक 75 प्रतिशत लोग ऐसे हैं जो कार्ड बनवाने के लिए पात्र नहीं हैं। वृद्धों को एक या अधिक बीमारियां होती हैं, 40 प्रतिशत को कोई न कोई दिव्यांगता होती है। 4 में से 1 व्यक्ति को कोई दिव्यांगता होती है। अस्पताल में भर्ती होने की दर 70 वर्ष और उससे ज्यादा उम्र की आबादी में लगभग 11.1 प्रतिशत है। जी.एम.एस.एच. के ऑर्थोपेडिक्स विभाग में स्कीम के तहत कई घुटने का ट्रांसप्लांट सबसे ज्यादा हैं। डॉ. सिंह का कहना है कि 70 प्रतिशत राशन कार्ड धारकों को भी कवर किया गया है और इस योजना के तहत 8,000 पैकेज मौजूद हैं। हमारे पास आयुष्मान मित्र हैं जो अस्पताल में आने वाले मरीजों को कार्ड बनाने में मदद करते हैं।

पी.जी.आई. में 50% मरीज पंजाब से

पी.जी.आई. हॉस्पिटल एड्मिशन ट्रेडेशन से डॉ. नवीन पांडे ने बताया कि 70 साल से ज्यादा लोग इलाज के लिए अस्पताल आने लगे हैं, हालांकि संख्या अभी भी कम है। लोग ऐप का इस्तेमाल कर घर पर ही कार्ड बना सकते हैं, हालांकि जरूरत पड़ने पर हमारे पास भी मदद मौजूद है। इस योजना का इस्तेमाल करने वाले लोगों की ज्यादा संख्या करीब 50 प्रतिशत पंजाब से है। बाकी हरियाणा, हिमाचल, चंडीगढ़, बिहार से हैं। इस उम्र के लोगों के लिए कोई अलग व्यवस्था या प्रक्रिया की जरूरत नहीं है, इसलिए हमारे पास लाभार्थियों के लिए सभी व्यवस्थाएं हैं।

सबसे ज्यादा मरीजों को दिया इलाज

आयुष्मान भारत योजना के तहत पी.जी.आई. ने 1.25 लाख से ज्यादा मरीजों का इलाज किया है। योजना के तहत कैंसर थेरेपी, न्यूरोसर्जरी, कार्डियोथोरेसिक सर्जरी और किडनी ट्रांसप्लांट जैसे इलाज मुफ्त में दिए गए हैं। देशभर में 100 से ज्यादा किडनी ट्रांसप्लांट मरीजों के लिए मुफ्त किए गए हैं। सिर्फ वित्तीय वर्ष 2023-24 में ही पी.जी.आई. ने 32,000 से ज्यादा आयुष्मान भारत लाभार्थियों का इलाज किया है, जिसमें 130 करोड़ रुपए से ज्यादा की राशि खर्च हुई है। पी.जी.आई. निदेशक प्रो. विवेक लाल की मानें तो पी.जी.आई. आयुष्मान भारत के तहत स्वास्थ्य सेवाओं में सभी केंद्र शासित प्रदेशों में सबसे आगे है।

Maharashtra Times • 15 Dec • Ministry of Ayush
One Health means integrated health.

8 • PG

276 • Sqcm

319091 • AVE

765.47K • Cir

Bottom Left

Pune

डॉ. सतीश पांडे
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जगभरात २०१९ मध्ये आलेल्या कोविडसाथीने सगळ्यांना हादरवून टाकले, याचे विस्मरण अजून झालेले नाही. या साथीने जगभरात कोट्यवधी बळी घेतले. याआधीही अशा अनेक प्राणीजन्य आजारानी मानवजातीचे मोठे नुकसान केले आहे. १८ व्या शतकात चेचक किंवा स्मॉल पॉक्स, देवीच्या विषाणूने चार लाख बळी घेतले होते. १५ व्या शतकात प्लेगने लंडनमधील २५ टक्के लोकसंख्या यमसदनास धाडली होती. त्यानंतर १९१८ मध्ये स्पॅनिश फ्लू ५० कोटी, तर १९६७-५८ मध्ये आशियाई फ्लूने दहा लाख बळी घेतले. अगदी अलीकडे १९८० मध्ये एचआयव्ही एडसने प्रचंड धिंगाणा घातला. त्याने आजपर्यंत ४ कोटी माणसांचे जीवन संपविले. लगोलग २००९ मध्ये स्वाईन फ्लूने सहा कोटी बळी घेतले.

उंदीर, वटवाघळी, पक्षी अशा प्राण्यांकडून येणारे आजार जीवघेणे ठरले आहेत. माणूस, पर्यावरण व प्राणी यांचे आरोग्य किंवा आजार एकमेकात कायमचे गुंफलेले आहेत. या संकल्पनेलाच वन हेल्थ किंवा एकात्मक आरोग्य असे संबोधले जाते. प्राण्यांच्या माणसाच्या सहवासातून विषाणूचा संसर्ग होतो. संसर्ग झालेल्या वस्तू खोकला शिंक क्रीटकांडारे पसरतात. एकेकाळी स्टीम बोटच्या वेगाने पसरणारा विषाणू आजच्या युगात जेट विमानाच्या वेगाने पसरत आहे. असे शास्त्रज्ञ अमेशा अडलजा म्हणतात. आजाराबद्दलचे अज्ञान, तापमान वाढ, वाढणारी

वन हेल्थ अर्थात एकात्मक आरोग्य

एकात्मक आरोग्य (वन हेल्थ)विषयावर सर्वांगीण विचारमंथनासाठी इला फाउंडेशन आणि इंडियन मेडिकल असोसिएशनने आज, (रविवारी) पुण्यात आयोजित केली आहे. यानिमित्ताने एकात्मक आरोग्य या संकल्पनेचा आढावा...

लोकसंख्या, दळणवळणाचे नवे वेगवान प्रकार, प्राण्यांची वाढणारा संपर्क, अधिवासात घुसखोरी व नवनव्या प्राण्यांचे मांस खाण्याची प्रवृत्ती, प्रदूषण आणि इतर कारणांमुळे प्राणीजन्य आजारांचे प्रमाण वाढीस लागले आहे. प्राणीजन्य आजार कोणालाही होतात, याचा अनुभव कोविडने दिला. मानवी डॉक्टर, पशुवैद्यक, वनविभागाचे कर्मचारी, मासेमारी करणारे, मेंढपाळ, गोशाळा व इतर पाळीव प्राणी संस्थेचे कर्मचारी, प्राणी संग्रहालय कर्मचारी अशांना प्रथम प्राणीजन्य आजार होतात. त्यातही रक्तदाब, मधुमेह, मूत्रपिंड आजार, थायरॉईड, अवयवरोपण झालेल्यांना प्राणीजन्य आजार होण्याची

शक्यता अधिक. उघडी गटारे, पिसवा- गोचिडांचे सानिध्य यातून प्राणीजन्य आजार माणसावर हल्ला करतात. प्रदूषण, अधिवास अतिक्रमण, नद्यांना आलेले गटाराचे स्वरूप, शिकार, कुपोषण या कारणांमुळे प्राणीजन्य आजार फोफावत आहेत. पुण्यासारख्या शहरात डेंगी, चिकनगुनिया, मलेरिया, फ्लू सतत डोके वर काढत आहेत. इतर शहरेही याला अपवाद नाहीत. नव्याने उद्भवणाऱ्या आजारांमध्ये ६० टक्के आजार प्राणीजन्य आहेत ही बाब चिंतेची आहे. प्राणीजन्य आजार ओळखणे सहज शक्य होत नाही. पण मुदतीचा ताप सर्दी, खोकला जो लवकर बरा होत नाही, स्नायू दुखणे, थकवा, सांधेदुखी होत

असल्यास डॉक्टरांचा सल्ला घेणे आवश्यक आहे. नियमित व्यायाम संतुलित आहार, पर्यावरण व स्वतःच्या शरीराची स्वच्छता, रोज अंपोळ, स्वच्छ भांडीकुंडी आणि स्वयंपाक घर स्वच्छ रोज धुतलेले कपडे घालणे, कातडीची निगा, गाई -गुरांची व पाळीव प्राण्यांची स्वच्छता, लसीकरण अशी खबरदारी घेतली तर प्राणीजन्य आजारांपासून आपण दूर राहू शकतो. एकात्मक आरोग्य संकल्पनेला महत्वाचे घटक आहेत अन्न सुरक्षा व ऑटोबायोटिक रेजिस्टन्स. उघड्यावर मिळणारे माशा घोणावत असणारे पदार्थ न खाणे अत्यंत गरजेचे आहे. मलमूत्राचे उघड्यावर विसर्जन, शिळ्या अन्नाचे सेवन, न शिजलेले अन्न खाणे, दूषित पाणी, असंतुलित आहार, हात न धुता जेवण करणे, गाई म्हशीच्या धारा काढून किंवा काढण्याआधी हात न धुणे, गोठ्याची अस्वच्छता अशी अनेक कारणे प्राणीजन्य आजारांचे गांभीर्य आणि प्रमाण वाढवतात. पाळीव कुशी, मांजरे इत्यादींचे लसीकरण न करणे, त्यांचा घरात अनिर्बंध संचार यामुळे गांभीर्य स्वरूपाचे आजार माणसाला होतात. शहरात वाढणारा कबुतरांचा उद्रेक, सातून राहणारा कचरा, प्रदूषित नद्या, धूर हे प्राणीजन्य आजारांचा निमंत्रण ठरतात. मानवी वैद्यकतज्ञ, पशुवैद्यकीय अधिकारी, विषाणूतज्ञ, हवामानतज्ञ, पर्यावरणतज्ञ, शेती संशोधक यांनी देवाण-घेवाण केली तरच प्राणीजन्य आजारांवर अंकुश बसेल. एकात्मक आरोग्य किंवा वन हेल्थ मिशनच्या कार्यातून भविष्यातील साथींना तोंड देता येईल.

(लेखक इला फाउंडेशनचे संचालक आहेत.)

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કસરત કરવાથી 24 કલાક માટે ઇન્સ્યુલિનનો પ્રભાવ વધી જાય છે

સોલિયસપુશઅપ્સ: ખુરશીમાં બેઠા-બેઠા સુગર ઘટશે



આ કસરત પિંડલીની માંસપેશીને ટાર્ગેટ કરે છે, જે મેટાબોલિઝમ વધારે છે. રિસર્ચ મુજબ આ કસરત 3 કલાકમાં 52 ટકા સુધી સુગર ઘટાડી શકે છે. તેના માટે ખુરશીમાં સીધા બેસી જાઓ. પગને

જમીન પર રાખો. હવે પંજા પર હળવું દબાણ આપીને એડીને ત્યાં સુધી ઊંચી કરો જ્યાં સુધી પિંડલીમાં ખેંચાણ ન થાય. પછી પગને નીચે મૂકો. રિપીટ કરો.

સ્ક્વોટ્સ: ગ્લૂકોઝના ઉપયોગને ઝડપથી વધારે છે



હાથને ખભાની ઊંચાઈ જેટલા સામેની દિશામાં ફેલાવો. હવે ધીમે-ધીમે નીચે બેસો અને જાંઘ જમીનને સમાંતન ન થાય ત્યાં સુધી બેસો. થોડો સમય થોભો અને ફરી ઊભા થઈ જાઓ. 10-15 મિનિટ સુધી સ્ક્વોટ્સ કરવાથી

માંસપેશીઓમાં ગ્લૂકોઝનો ઉપયોગ વધે છે.

બ્રિસ્કવોક: સુગર 50 ગણી ઝડપે ઘટે છે



તમે જ્યારે એટલી ઝડપથી ચાલો કે સાથે ચાલી રહેલી વ્યક્તિ સાથે વાત પણ ન કરી શકો તો તેને બ્રિસ્ક વોક કહે છે. આ ઝડપે કરાયેલી 2 થી 5 મિનિટની વોક પણ સુગર ઘટાડવામાં મદદરૂપ છે. રિસર્ચ કહે છે કે, બેસવાની સરખામણીએ આ 50 ગણી ઝડપે સુગર ઘટાડે છે.

વોલસિટ: ગ્લૂકોઝને તરત માંસપેશીઓમાં મોકલે છે

કોઈ દીવાલને ટેકે ઊભા રહો. પગને લગભગ જમીન પર દોઢ ફૂટ પહોળા કરો. હવે શ્વાસ છોડીને જેટલું બની શકે ખુરશીની પોઝિશનમાં આવવાનો પ્રયાસ કરો. કુલા ધૂંટણથી નીચે ન હોય એનું ધ્યાન રાખો. આ સ્થિતિમાં 30 સેકન્ડથી 1 મિનિટ થોભો. હવે શ્વાસ લઈને ઊભા થાઓ. આપ્રેક્ટિસ ગ્લૂકોઝને તરત જ માંસપેશીઓમાં મોકલે છે.



સાઈકલિંગ: 30 મિનિટમાં આખા દિવસનું સુગર નિયંત્રિત રાખે છે

સાઈકલિંગ વધી ગયેલી સુગરને નિયંત્રણમાં લેવામાં અત્યંત અસરકારક છે. રિસર્ચ મુજબ જો 20 થી 22 કિમી પ્રતિ કલાકની ઝડપે 30 મિનિટ સુધી સાઈકલિંગ કરવામાં આવે તો વજન ધરાવતા લોકોનું સુગર આગામી 24 કલાકમાં અડધું થઈ શકે છે. આ ઝડપે અડધો કલાક સુધી કરેલું સાઈકલિંગ 24 કલાક સુધી સુગરને નિયંત્રિત કરવામાં મદદ કરે છે.

