2024 : A Year of Transformative Strides in Medicine, Surgery and Public Health

s 2024 draws to a close, the Journal of the Indian Medical Association (JIMA) reflects with pride on the remarkable advancements and challenges that have defined the year in medicine and public health. These 12 months were a testament to the resilience, innovation, and dedication of the global medical community in addressing some of the most pressing healthcare issues of our time.

This year was not just about scientific discoveries but also about fostering a deeper understanding of the human condition and its interplay with health systems, policies, and technology. From groundbreaking therapies that redefined chronic disease management to policy interventions aimed at ensuring equitable access to healthcare, 2024 encapsulated the diversity and depth of the global healthcare landscape.

Through its editorials, JIMA captured the pulse of these developments, offering a platform for thought leadership and dialogue on the multifaceted challenges in healthcare. Themes ranging from the ethical integration of artificial intelligence and advancements in surgical technologies to the evolving landscape of mental health and the persistent fight against inequities in healthcare access have illuminated the path forward.

This retrospective highlights the pivotal moments and overarching themes of 2024, offering insights into how these advancements are shaping our collective pursuit of health and well-being. It also serves as a reminder of the enduring challenges that require our unwavering commitment as we move into 2025. By reflecting on the strides made and the lessons learned, JIMA reaffirms its dedication to fostering knowledge, innovation, and collaboration in the ongoing journey toward better health for all.

ADVANCING THERAPEUTICS AND TECHNOLOGIES

Breakthroughs in Diabetes Care:

The year 2024 marked pivotal advancements in the treatment of Type 2 Diabetes Mellitus (T2DM), with oral semaglutide emerging as a landmark therapeutic option for more than last 2 years. This novel oral GLP-1 receptor agonist, marketed under the brand name Rybelsus, revolutionized diabetes care by addressing the long-standing challenges associated with injectable GLP-1 agonists. Leveraging innovative SNAC (Sodium N-[8-(2-hydroxybenzoyl) Amino] Caprylate) technology, oral semaglutide ensures stable absorption of the peptide in the gastrointestinal tract, overcoming degradation barriers and offering efficacy comparable to its injectable counterparts. This innovation not only simplifies the management of

T2DM but also significantly enhances patient adherence and satisfaction by eliminating needle-related barriers such as fear and discomfort.

Additionally, the development of once-weekly insulins like Insulin Icodec and Efsitora Alfa heralded a transformative step in basal insulin therapy. These ultra-long-acting insulins, with pharmacokinetic profiles offering stable glycemic control over a week, reduce the need for daily injections, mitigating the logistical and psychological burdens on patients. Phase III trials revealed their efficacy in achieving glycemic targets comparable to daily basal insulins, with no additional risks of hypoglycemia. By minimizing the frequency of injections, these insulins are poised to redefine diabetes management, making therapy more accessible and sustainable for a larger population.

Progress in Robotic-Assisted Surgery:

The field of surgical technology witnessed groundbreaking enhancements in Robot-assisted Surgery (RAS). The da Vinci Xi system, a master-slave robotic platform, continued to set the standard for precision, offering unparalleled three-dimensional magnified views and ergonomic control for surgeons. These advancements translated into reduced intraoperative complications, such as blood loss, and improved surgical outcomes across specialties, including urology, gynecology, and oncology.

To address one of the key limitations of robotic platforms – the lack of tactile sensation – innovations like VerroTouch, a haptic feedback system under development, have garnered significant attention. This system integrates vibrotactile feedback and stereo sound to replicate the sensation of touch, enabling surgeons to navigate complex anatomical structures with greater confidence. Complementing these advancements, augmented vision systems and real-time tracking technologies allowed precise overlay of imaging data, such as MRI or CT scans, onto the surgical field. This integration of imaging and robotics transformed procedures like radical prostatectomies, enhancing both oncological precision and functional outcomes .

Artificial Intelligence : Revolutionizing Medicine

Artificial Intelligence (AI) maintained its trajectory as a transformative force across healthcare in 2024. AI technologies expanded their footprint, from predictive analytics in cardiology to diagnostic imaging in oncology. For instance, AI algorithms trained on large datasets demonstrated superior accuracy in predicting cardiovascular risks compared to traditional

methods. In oncology, Al-powered tools optimized histopathological image analysis, facilitating earlier cancer diagnoses and personalized treatment strategies.

Despite these breakthroughs, challenges persist. Ensuring the clinical validation of AI tools remains critical to gaining widespread trust and adoption. Many models show promise in controlled environments but lack robustness in real-world scenarios, raising concerns about generalizability. Furthermore, ethical issues, such as data privacy, algorithmic biases, and the potential over-reliance on AI systems, highlighted the need for a balanced approach that integrates technological innovation with human oversight.

The path forward lies in embracing AI as a collaborative partner, augmenting rather than replacing human expertise. This partnership must prioritize ethical frameworks, transparency, and rigorous validation to harness AI's full potential while preserving the human touch central to patient care.

CHRONIC DISEASES AND PREVENTIVE CARE

Tackling End-Stage Kidney Disease : The Promise of Bioartificial Kidneys

Chronic diseases like End Stage Kidney Disease (ESKD) remain a growing global health challenge, with increasing prevalence fueled by lifestyle diseases such as diabetes and hypertension. In India, the burden of ESKD is particularly daunting, with over 90% of patients unable to access renal replacement therapies due to financial constraints. Against this backdrop, 2024 saw significant editorial focus on bioartificial kidneys, a revolutionary development in nephrology.

Bioartificial kidneys represent a quantum leap in renal replacement therapy. These devices are designed to mimic the filtration, absorptive, and secretory functions of human kidneys, offering an alternative to conventional dialysis or transplantation. Leveraging breakthroughs in nanotechnology, they integrate silicon nanopore membranes and cultured proximal tubular epithelial cells to deliver continuous renal support without the need for immunosuppressive therapy. Their portability, efficiency, and independence from donor organs position them as a transformative solution for ESKD patients, especially in resource-limited settings.

Moreover, wearable and implantable versions of these devices have advanced to preclinical trials, demonstrating promising outcomes. These technologies could alleviate the dependency on dialysis centers, reduce treatment costs, and improve patients' quality of life, representing a beacon of hope for millions struggling with kidney failure globally.

Headache Disorders : Evolving Strategies for a Changing Landscape

Primary headache disorders, including migraine and tension-type headaches, constitute a significant but often underdiagnosed public health concern in India. These disorders affect a broad demographic, with recent studies highlighting their disproportionate impact on women and younger populations. The prevalence of migraine, for example, reaches as high as 23% in certain regions, emphasizing the need for targeted interventions tailored to local epidemiological trends.

Editorials in 2024 highlighted the shifting clinical landscape of headache disorders, focusing on improvements in diagnosis, management, and public health strategies. Advances in neuroimaging and diagnostic tools have facilitated better differentiation of primary headache types, enabling more precise treatment plans. The integration of pharmacological therapies, including triptans for acute attacks and beta-blockers or CGRP (Calcitonin Gene-Related Peptide) inhibitors for prophylaxis, has transformed patient outcomes. Additionally, non-pharmacological approaches, such as cognitive behavioral therapy and mindfulness-based interventions, have gained traction as complementary options.

Public health initiatives, including awareness campaigns and training programs for primary care physicians, have also been pivotal in bridging gaps in care. These efforts are particularly crucial in rural and underserved areas, where access to neurologists and specialized headache clinics remains limited. The emphasis on preventive care, lifestyle modification, and early intervention has positioned India to better address the substantial personal and societal burden imposed by headache disorders.

WOMEN'S HEALTH AND ENDOMETRIOSIS

Understanding the Complexity of Endometriosis:

Endometriosis, a chronic and often debilitating gynecological condition, was a focal point in 2024 editorials due to its multifaceted nature and significant impact on women's health. Affecting an estimated 10-15% of women of reproductive age globally, this enigmatic disease is characterized by the presence of endometrial-like tissue outside the uterus, leading to symptoms such as chronic pelvic pain, dysmenorrhea, dyspareunia, and subfertility. The varied clinical manifestations and the elusive pathophysiology of endometriosis continue to pose

challenges for timely diagnosis and effective management.

Diagnostic Challenges:

A recurring theme in the discussions was the complexity of diagnosing endometriosis. While advances in imaging techniques like pelvic ultrasonography and MRI have enhanced diagnostic accuracy, limitations persist. Notably, the reliance on clinical presentation and the use of biomarkers such as CA-125, which have limited diagnostic value, underline the need for improved non-invasive diagnostic tools. Additionally, the editorial highlighted a paradigm shift from laparoscopic confirmation as the gold standard to more patient-friendly diagnostic strategies that prioritize symptom assessment and imaging.

Tailored Medical Interventions:

Hormonal therapies remain the cornerstone of endometriosis management. Editors emphasized the efficacy of Dienogest, a selective progestogen known for its ability to reduce pain and suppress disease progression. Long-term therapies such as Levonorgestrel-releasing intrauterine systems (LNG-IUS) and GnRH agonists were also noted for their role in mitigating recurrent symptoms and enhancing patient satisfaction. Continuous Combined Oral Contraceptives (COCs) were highlighted as an effective, non-invasive option for managing dysmenorrhea and other cyclical symptoms, providing sustained relief and improving quality of life.

Despite these advances, hormonal therapies are not without limitations, including side effects like irregular bleeding, weight gain, and potential impacts on bone mineral density. The editorials underscored the importance of tailoring treatments to individual patient profiles, considering factors such as symptom severity, fertility goals, and tolerance to medications.

Innovations in Surgical and Assisted Reproductive Technologies :

Surgical intervention remains indispensable for certain patients, particularly those with severe pain, Deep Infiltrating Endometriosis (DIE), or ovarian endometriomas. The editorials advocated for evidence-based surgical approaches, emphasizing the benefits of excision over ablation for reducing pain and recurrence. However, the potential impact of surgery on ovarian reserve necessitates a balanced discussion with patients, particularly those seeking fertility preservation.

In cases of endometriosis-associated infertility, the role of Assisted Reproductive Technologies (ART)

was underscored as a pivotal option. Techniques such as In Vitro Fertilization (IVF) provide a pathway for achieving pregnancy in patients where other interventions have failed. Recent innovations in ART, including improved protocols for ovarian stimulation and embryo transfer, were highlighted as critical tools for addressing the unique challenges posed by endometriosis.

Bridging Gaps in Care:

The editorials drew attention to persistent gaps in care, including delays in diagnosis and limited access to specialized treatment in resource-constrained settings. The psychosocial impact of endometriosis, encompassing its effects on mental health, relationships, and professional life, was a recurring theme, advocating for holistic management approaches. Strengthening public awareness, training healthcare providers, and investing in research to unravel the pathophysiology of the disease were identified as critical priorities for reducing the burden of endometriosis.

The Road Ahead:

While significant progress has been made in the diagnosis and management of endometriosis, the editorials stressed the need for continued innovation and a patient-centered approach. By integrating advancements in medical and surgical therapies with broader systemic changes in healthcare delivery, there is potential to transform outcomes for millions of women affected by this condition.

GLOBAL HEALTH AND POLICY: HEALTH AS A HUMAN RIGHT

Advocating for Universal Health Coverage:

The editorial "My Health, My Right", published in alignment with World Health Day 2024, served as a powerful call to action, emphasizing the inextricable link between health and human rights. Framed around the theme of equitable access to healthcare, the editorial highlighted the urgency of achieving Universal Health Coverage (UHC) – a vision where all individuals, irrespective of socioeconomic status, geography, or gender, can access quality health services without financial hardship. With over 4.5 billion people globally lacking full access to basic healthcare services, the editorial underscored the critical need for systemic reforms to bridge this gap .

Progress and Challenges in South-East Asia:

The editorial presented a mixed picture of progress within the South-East Asia Region (SEAR). Notable achievements included an increase in the Universal Health Coverage service coverage index from 47 in

2010 to 62 in 2021, alongside a 68.5% reduction in maternal mortality and dramatic declines in neonatal and under-five mortality rates. Despite these advances, disparities remain stark: nearly 40% of the region's population still lacks access to basic healthcare, with preventable deaths from non-communicable diseases (NCDs) such as cancer, diabetes, and cardiovascular conditions persisting at alarmingly high rates .

Equity in Access to Care:

The editorial addressed the pervasive inequities in healthcare access, particularly for marginalized populations. Women, rural communities, and economically disadvantaged groups were identified as bearing the brunt of healthcare disparities. Gender-based inequities in diagnosing and treating conditions like diabetes and hypertension were highlighted, with women often receiving delayed or insufficient care compared to men. The editorial also pointed to the persistent public health crisis of violence against women, noting that over one-third of women in SEAR have experienced intimate partner violence, further undermining their health and well-being.

Policy Directions and Systemic Reforms:

To realize the vision of health as a fundamental right, the editorial advocated for multifaceted systemic reforms:

- Investing in Healthcare Infrastructure: Prioritizing underserved regions and building robust systems to ensure the availability of quality health services in both rural and urban areas.
- Human Resource Development: Expanding the healthcare workforce, with a focus on training primary care providers, midwives, and nurses to address shortages, particularly in rural areas.
- Health Financing: Implementing financial models that protect households from catastrophic health expenditures, such as public insurance schemes and government subsidies for essential services.
- 4) Gender Equity in Healthcare: Developing targeted interventions to close gender gaps in diagnosis, treatment, and prevention, with an emphasis on diseases that disproportionately affect women.
- 5) Community Engagement: Empowering communities through health education, awareness campaigns, and the promotion of preventive care practices.
- 6) Integrated Health Systems: Strengthening primary healthcare systems to serve as the foundation for comprehensive, accessible, and equitable health services.

Health Beyond Healthcare:

The editorial highlighted the importance of addressing broader determinants of health, such as clean water, adequate nutrition, safe housing, and education. It argued that achieving health equity requires tackling social and environmental inequities that perpetuate cycles of poverty and ill-health. By framing health as a cornerstone of human dignity and development, the editorial underscored its role in fostering inclusive and prosperous societies.

A Moral and Practical Imperative:

At its core, "My Health, My Right" reminded readers that equitable healthcare is not merely a moral obligation but also a practical necessity for sustainable development. As nations navigate complex public health crises and demographic shifts, ensuring access to healthcare for all emerges as a crucial strategy for building resilient communities and economies.

A Call to Action:

The editorial concluded with a resounding call for collective action, emphasizing the urgent need for governments, policymakers, and global stakeholders to come together in the pursuit of health equity. It highlighted the importance of aligning national and international efforts with the principles of Sustainable Development Goal 3 - to ensure healthy lives and promote well-being for all at all ages. By addressing systemic inequities, investing in inclusive healthcare systems, and fostering global cooperation, the vision of health as a universal right can evolve from a distant aspiration to a tangible reality. The editorial underscored that achieving this goal is not only a moral imperative but also a critical step towards creating resilient communities and sustainable futures, where no one is left behind in the journey toward health and well-being.

MENTAL HEALTH IN TRANSITION

Progress Shaped by the Mental Healthcare Act of 2017:

The Mental Healthcare Act of 2017 represented a significant legislative milestone in India, laying the foundation for a rights-based approach to mental health. By defining access to mental healthcare as a fundamental right, the Act mandated the provision of affordable, accessible, and high-quality mental health services for all citizens. It also emphasized decriminalizing suicide, safeguarding patient rights, and ensuring that mental health care is provided with dignity and respect. The editorials in 2024 reflected

on the progress spurred by this Act, particularly in raising awareness and encouraging policy shifts that prioritize mental health as a critical component of public health.

Integration of Mental Health into Primary Care:

The District Mental Health Program (DMHP) emerged as a cornerstone initiative for integrating mental health services into primary healthcare. This program, operational under the broader National Mental Health Program (NMHP), was designed to decentralize mental health services, making them accessible to underserved populations at the district level. The DMHP focuses on early detection, treatment, rehabilitation, and community outreach, addressing conditions ranging from Common Mental Disorders (CMDs) like depression and anxiety to Severe Mental Disorders (SMDs) such as schizophrenia and bipolar disorder.

Key Components of the DMHP include:

- Training Primary Care Workers: Empowering general practitioners and healthcare workers with the skills to identify and manage mental health conditions.
- 2) Community Engagement: Conducting mental health awareness campaigns to reduce stigma and promote early intervention.
- 3) Strengthening Infrastructure: Establishing district mental health clinics and integrating psychiatric wings in general hospitals.
- 4) Service Delivery Models: Promoting telepsychiatry and mobile outreach to bridge the gaps in rural and remote areas.

Persisting Challenges: Stigma and Resource Gaps:

Despite these advancements, significant barriers persist. Stigma surrounding mental illness remains one of the most formidable obstacles to care. Many individuals delay or avoid seeking treatment due to fear of social ostracism, compounded by limited awareness of mental health conditions. The editorials highlighted the need for sustained public education campaigns to challenge misconceptions and normalize discussions about mental health.

Additionally, resource constraints hinder the effective implementation of mental health programs. A glaring shortage of mental health professionals – including psychiatrists, psychologists, and social workers – limits the program's reach. India's mental health workforce density remains far below global recommendations, particularly in rural areas where access to specialized care is minimal. Financial

constraints further exacerbate the situation, with mental health services often receiving insufficient funding relative to other health sectors.

The Role of Technology in Mental Health:

Amid these challenges, technology is emerging as a transformative tool in mental health care. Telepsychiatry platforms, digital mental health apps, and virtual counseling sessions are increasingly being integrated into service delivery models. These innovations have expanded access to care, particularly for populations in remote and underserved areas and have shown promise in mitigating the stigma associated with in-person consultations.

Charting a Path Forward:

To build on the momentum created by the Mental Healthcare Act and the DMHP, a multi-pronged approach is essential:

- Scaling Mental Health Services: Expanding the DMHP to cover all districts and ensuring consistent funding for program sustainability.
- Workforce Development: Investing in the training and recruitment of mental health professionals and incentivizing their deployment in rural areas.
- Community-Based Care Models: Strengthening partnerships with local organizations and self-help groups to create a supportive ecosystem for mental health care.
- 4. Policy Advocacy: Prioritizing mental health in national health budgets and fostering cross-sectoral collaborations to address social determinants of mental health.

Towards a Mentally Healthy India:

The editorials concluded that while the progress in mental health care has been encouraging, the road ahead demands unwavering commitment from stakeholders. Bridging the gaps in service delivery, addressing stigma, and integrating mental health into broader healthcare systems are pivotal to ensuring equitable access to care. By leveraging the potential of technology, fostering community engagement, and advocating for systemic reforms, India can chart a path toward a future where mental health is not only a policy priority but also a societal norm.

LEGAL AND ETHICAL DIMENSIONS IN MEDICINE

Navigating Medical Negligence : Professional Accountability

The issue of medical negligence was a prominent theme in the 2024 editorials, highlighting its critical impact on trust within doctor-patient relationships. Medical negligence, as defined by the Medical Council Act, involves a failure on the part of a registered practitioner to provide the standard of care expected, leading to harm or injury to the patient. The editorials emphasized that professional accountability is central to mitigating negligence. This includes maintaining up-to-date knowledge, practicing within the scope of expertise, and adhering to established protocols and guidelines. The importance of clear communication with patients and meticulous documentation of clinical decisions was also stressed as foundational to demonstrating accountability.

Patient Consent : A Cornerstone of Ethical Practice

Editorials underscored the pivotal role of informed consent in ethical medical practice. Consent must be obtained through a transparent process where patients are provided with clear, comprehensive information about their diagnosis, treatment options, risks, benefits, and potential alternatives. The editorials delineated between types of consent:

- Implied Consent, limited to routine examinations and non-invasive procedures.
- Written Consent, mandatory for invasive interventions, high-risk procedures and treatments involving potential complications.

The practice of obtaining "blanket consents," which lack specificity, was criticized as legally invalid. Instead, tailored, procedure-specific consents were advocated, witnessed by neutral parties to ensure ethical compliance. The inclusion of therapeutic privilege – where certain risks might be withheld if disclosure is deemed detrimental to the patient – was discussed as a nuanced aspect requiring cautious application.

Ethical Standards: A Guide to Medical Integrity

The editorials stressed adherence to ethical principles as the backbone of medical integrity. Key recommendations included:

- Respect for Patient Autonomy: Honoring patients' rights to make informed decisions about their care.
- 2) Non-Maleficence and Beneficence: Balancing the duty to avoid harm with the imperative to promote well-being.
- Justice: Ensuring equitable access to care, regardless of socioeconomic or demographic factors.

Ethical concerns surrounding confidentiality, especially in sensitive cases, were highlighted. Practitioners were advised to uphold privacy while navigating scenarios where third-party disclosures might be necessary for public safety.

Preventive Strategies to Mitigate Litigation:

To reduce the incidence of medical litigation, the editorials outlined practical measures:

- Continuing Medical Education (CME):
 Regularly updating knowledge and skills to meet evolving standards of care.
- Professional Etiquette: Maintaining respectful communication with patients and colleagues to foster trust.
- Detailed Medical Records: Keeping thorough, chronological, and tamper-proof documentation as evidence of due diligence.
- 4) Seeking Second Opinions: In complex or ambiguous cases, consulting peers to ensure comprehensive evaluation and shared responsibility.

Special attention was given to the importance of a professional demeanor, advising practitioners to communicate empathy, avoid overpromising outcomes, and ensure transparency during adverse events.

Fostering Trust in the Doctor-Patient Relationship

The editorials acknowledged that trust is the cornerstone of effective healthcare delivery. Instances of negligence, whether perceived or real, erode this trust and often lead to disputes. To rebuild and sustain this trust, practitioners were encouraged to adopt proactive communication strategies, foster openness in discussing complications and prioritize patient safety above all.

The Ethical and Legal Horizon:

Looking ahead, the editorials advocated for systemic reforms to support practitioners and patients alike. These include:

- Legal Safeguards for Practitioners: Implementing frameworks that protect doctors from frivolous lawsuits while holding them accountable for genuine lapses.
- Patient Advocacy Systems: Establishing mechanisms to mediate disputes and provide patients with a fair hearing before litigation.
- Ethics Committees: Strengthening institutional review boards to guide practitioners through ethically complex decisions.

The discussions on medical negligence and ethics in 2024 emphasized that a culture of transparency, accountability and respect is essential for advancing healthcare. By adhering to high ethical standards and implementing robust preventive strategies, the medical community can not only reduce litigation risks but also foster a stronger, trust-based doctor-patient

relationship that ultimately enhances the quality of care.

The Road Ahead:

As we stand at the threshold of a new year, the editorial reflections from 2024 offer a moment of pause – both to celebrate the strides we have made and to acknowledge the work that remains. The year has been marked by transformative progress across healthcare, from the introduction of groundbreaking therapies to advancements in technology and policy frameworks aimed at fostering equitable health systems. These developments serve as a testament to the resilience and ingenuity of the global medical community, yet they also underscore the complexity of the challenges that lie ahead.

Expanding Access to Groundbreaking Therapies The advent of innovative therapies, such as oral semaglutide for diabetes and bioartificial kidneys for chronic kidney disease, has shown the potential of modern medicine to not only enhance patient outcomes but also improve accessibility and adherence. The road ahead demands a concerted effort to ensure these advancements are not limited to affluent populations but reach underserved communities globally. Scaling distribution networks, reducing costs, and fostering partnerships between governments and private sectors will be critical to achieving universal access to these life-saving interventions.

Building Equitable Health Systems:

The call for universal health coverage and the recognition of health as a fundamental right have gained momentum, but significant inequities persist. The path forward must prioritize closing gaps in healthcare access, particularly for marginalized populations, women, and rural communities. Strengthening primary healthcare, addressing social determinants of health and investing in infrastructure and human resources will be foundational in building resilient and inclusive health systems. This endeavor will also require innovative financing mechanisms and policies that ensure no one is left behind in the pursuit of well-being.

Navigating the Ethical Integration of AI:

Artificial Intelligence continues to redefine the boundaries of medicine, offering unprecedented opportunities to improve diagnostics, personalize treatments and optimize healthcare delivery. However, its integration is fraught with ethical challenges, including issues of privacy, bias and the potential for over-reliance on machine learning systems. The road

ahead must include robust regulatory frameworks, transparent validation processes, and an unwavering commitment to balancing Al's capabilities with the irreplaceable human touch. Embracing Al as a collaborative tool rather than a replacement for clinical expertise will be key to its responsible and effective implementation.

Advancing Research and Innovation:

Innovation remains the lifeblood of medical progress, and the need for multidisciplinary research has never been greater. From precision medicine to regenerative therapies and sustainable public health strategies, the scope of research must expand to address the evolving challenges of our times. Collaboration between academia, industry, and policymakers will play a crucial role in translating discoveries into tangible healthcare improvements.

Fostering a Global Dialogue:

The challenges of global health – from pandemics to chronic disease burdens – demand collective action and shared learning. JIMA reaffirms its commitment to being at the forefront of this evolving narrative, serving as a platform for disseminating knowledge, fostering dialogue among stakeholders, and inspiring innovation. By championing evidence-based practices, ethical integrity and inclusivity, the journal aims to contribute meaningfully to shaping the future of healthcare.

A Call to Action:

The journey ahead is as demanding as it is promising. As we navigate the complexities of a rapidly evolving healthcare landscape, the vision of a healthier, more equitable world must guide our efforts. This requires not only technical excellence but also a steadfast dedication to compassion, collaboration, and the well-being of all. The reflections from 2024 remind us that progress is possible when we unite in purpose and action, and they inspire us to meet the opportunities and challenges of 2025 with renewed resolve and optimism.

JIMA looks forward to continuing its legacy of thought leadership and advocacy, shaping a future where medical advancements, ethical practices, and equitable health systems converge to uplift humanity. Together, we can transform the aspirations of today into the achievements of tomorrow.

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