



ADHARSHILA

FAMILY HEALTH CENTRE

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PROACTIVETM
Enhancing Digital Experience



QUARTERLY PROGRESS REPORT
JANUARY 2026 – MARCH 2026
(HARKESH NAGAR, JAIPUR CENTRE AND GURUGRAM)

PROGRAM OVERVIEW:

Program Name:	Family Health Centre
Areas Covered in Delhi	<ul style="list-style-type: none">● Harkesh Nagar● Sanjay Colony● Govind Puri● Kalkaji● Okhla I, II & III● Tughlakabad● Sangam Vihar● Madangir● Dakshin Puri● Madanpur Khadar● Badarpur
Areas Covered in Gurugram	<ul style="list-style-type: none">● Gurugram● Gwal Pahari● New Gwal Pahari● Wazirabad● Ghata● Bandari● Shanti Colony● Bapu Colony● Mandi● Jonapur● Tigra Village● Badshah Pur● Kanhai Gaon Slum, Sector-45● Kadar Pur
Reporting Period:	January 2026 – March 2026

PROGRAM INTRODUCTION/DESCRIPTION:

The Objective of the Proposed Project:

Adharshila Family Health Center aims to improve overall health outcomes through a comprehensive health delivery program in the slums, urban and semi-urban villages of Delhi NCR and Gurugram to reach the economically weaker sections.

The project aims to achieve the following:

1. To provide doctor consultations to low-income families in urban and semi-urban villages in Delhi NCR and Gurugram
2. To expand outreach of healthcare services through mobile support services.
3. To promote preventive health care by increasing awareness of Osteoporosis, Hypertension, Diabetes, Cancer, Anemia, counseling for family planning and birth spacing, sexual and reproductive health, and menstruation.

Project Locations:

1. I – 75A, Harkesh Nagar Okhla Phase – III, New Delhi – 110020
2. 81, Molarband Village, Badarpur, New Delhi – 110044
3. Gwal Pahari, Gurugram- 122003

Target group:

The target group is formed by migrant and economically disadvantaged groups predominantly from Uttar Pradesh, Bihar, Haryana, Rajasthan, West Bengal, Assam, Odisha, Nepal, Delhi-NCR, and Gurugram. The program is implemented in the informal settlements, urban and semi-urban villages of Delhi NCR including Harkesh Nagar, Tughlakabad village, Sanjay Colony, Okhla, Tigri, Sangam Vihar, Madangir (Delhi), Madan Pur Khadar, Noida (Uttar Pradesh), Gwal Pahari (Gurugram), Wazirabad, Ghata, Bandwadi, Mandi, Jonapur, Tigra Village, Badshah Pur, Kanhai Gaon Slum, Sector-45.

PROGRAM IMPLEMENTATION PROCESS

Introduction:

During this quarter, with your co-support, a total of **7377** beneficiaries were reached. This quarter, we have truly made unprecedented progress, accomplishing beyond what we intended to deliver. With staggering allopathic registration of **3193**, Physiotherapy OPDs **120**, and homeopathic being **1173**, we have expanded our horizons of outreach manifold. Awareness, something that has no finish line, given the changing scenario, is a word that we have heard over and over again. We try to modulate our sessions in such a way that they are consolidated and far-fetching. The direct beneficiaries reached out were **869** and **4345** indirect beneficiaries (Indirect beneficiaries are people whom we aim to impact indirectly through our awareness sessions. It is assumed that for one -an individual who attends the session, there are 5 people who are indirectly impacted-which may include friends/family/peer group). Team Adharshila has been proactive in providing various healthcare initiatives as well as enhancing health awareness among the vulnerable population. We focused on conducting camps this quarter and were able to conduct health camps successfully with beneficiaries' coverage as **1153** as tabulated below.

Major activities that were conducted during the reporting period:

S. No.	Name of the Activity	Total
1	OPD - Stationery & Outreach (Harkesh Nagar, Jaitpur, and Gurugram)	3193
2	OPDs - Physiotherapy	120
3	OPDs - Homeopathy	1173
4	Eye Checkup and BMD Screening Camp at Gwal Pahari	143
5	Eye Checkup and BMD Screening Camp at Harkesh Nagar	155
6	Eye Checkup Camp at Gwal Pahari Govt. School	176
7	General Health Camp at Trehan IRIS	217
8	Awareness Session on Menstrual Health and Hygiene	311
9	Awareness session on low-cost Nutrition	43
10	Awareness Session on Diabetes	125
11	Awareness Session on Pre-Pregnancy Nutrition	151
12	Awareness Session on Kangaroo Mother Care	129
13	Awareness Session on Anemia	45
14	Awareness Session on Budget Friendly Nutrition and Healthy Eating	65
15	Population Screening for CKD/DM/HT patients	462
	Total	6508
	Number of Indirect Beneficiaries	869
	Grand Total	7377

1. OPDs

1.1) OPDs – Stationery & Outreach (Delhi)

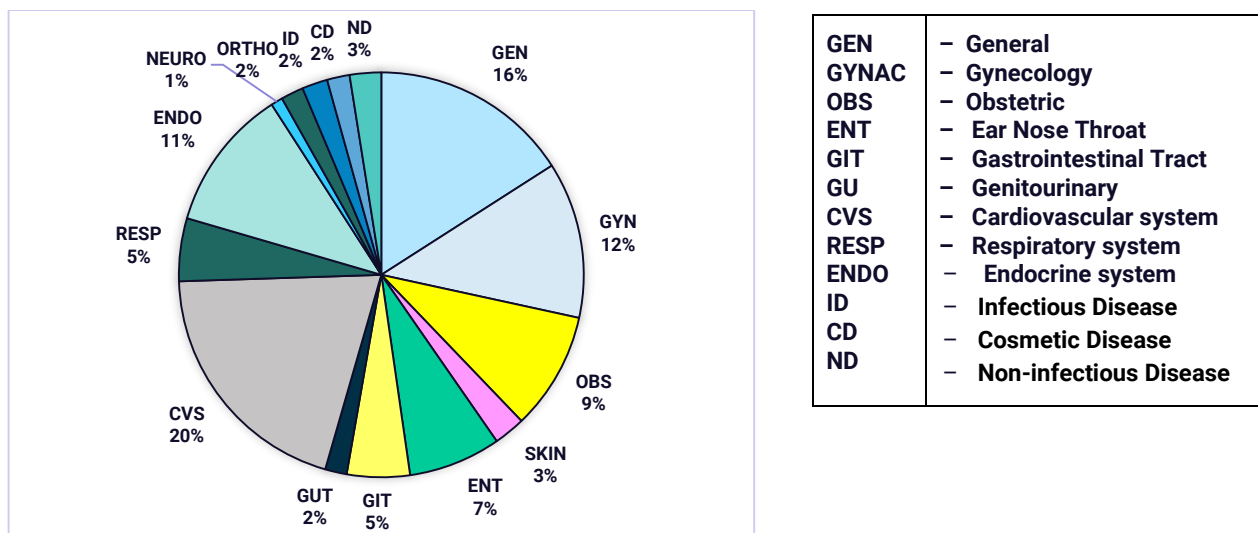
- OPDs were conducted at Harkesh Nagar and Jaitpur Centers by the health team.
- 1274 doctor's consultations were availed by the patients.
- Pathology tests were conducted for 101 patients.
- USG was conducted for 24 patients.
- Albendazole tablets were given to 56 patients for deworming.
- Immunization (Tetanus vaccine) was provided to 09 ANC patients.
- OCP (Mala D/Femilon) tablets were given to 14 patients for contraception.
- Diet counseling was given to obese, hypertensive, and diabetic patients.
- Counseling was also provided to patients regarding the right posture to avoid physical pains and aches.



Doctor Consultation OPDs Report (Delhi)

DATE	GEN	GYN	OBS	SKIN	ENT	GIT	GUT	CVS	RESP	ENDO	NEURO	ORTHO	ID	CD	ND	TOTAL
January 26	57	54	37	06	37	20	06	98	31	40	03	01	12	11	12	425
February 26	48	58	42	05	23	25	08	75	12	59	01	15	08	04	10	393
March 26	98	47	41	21	34	19	08	82	21	46	08	07	06	08	10	456
TOTAL	203	159	120	32	94	64	22	255	64	145	12	23	26	23	32	1274

Pie chart showing various ailments reported



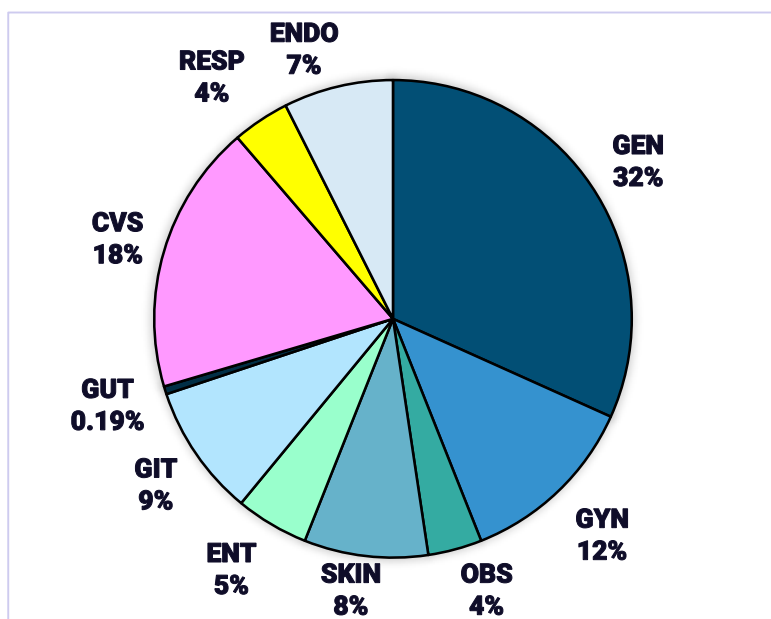
1.2) OPDs – Stationery (Gwal Pahari)

- OPDs were conducted at Gwal Pahari by the health team.
- 930 doctor’s consultations were availed by the patients.
- Pathology tests were conducted for 37 patients.
- USG was conducted for 13 patients.
- Albendazole tablets were given to 31 patients for deworming.
- OCP (Mala D/Femilon) tablets were given to 16 patients for contraception.
- Immunization (Tetanus vaccine) was provided to 04 ANC patients.
- Diet counseling was given to obese, hypertensive, and diabetic patients.
- Counseling was also provided to patients regarding the right posture to avoid physical pains and aches.

Doctor Consultation OPDs Report (Gwal Pahari- Gurugram)

DATE	GEN	GYN	OBS	SKIN	ENT	GIT	GUT	CVS	RESP	ENDO	TOTAL
January 26	83	40	14	25	12	26	02	49	18	31	300
February 26	66	30	09	23	30	23	01	54	09	15	260
March 26	146	44	11	30	04	34	02	67	09	23	370
TOTAL	295	114	34	78	46	83	05	170	36	69	930

Pie chart showing various ailments reported



GEN	- General
GYNAC	- Gynecology
OBS	- Obstetric
ENT	- Ear Nose Throat
GIT	- Gastrointestinal Tract
GU	- Genitourinary
CVS	- Cardiovascular system
RESP	- Respiratory system
ENDO	- Endocrine system

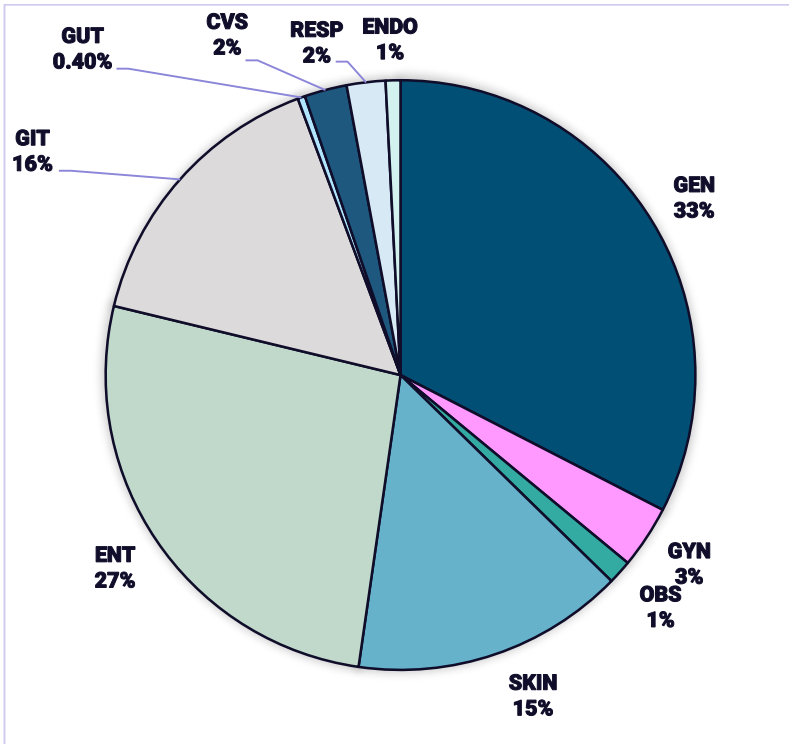
1.3) OPDs – Outreach Area (Gurugram)

- OPDs were conducted at Gurugram Outreach Areas by the health team.
- 989 doctor’s consultations were availed by the patients.
- Albendazole tablets were given to 105 patients for deworming.
- Pathology tests were conducted for 03 patients.
- Diet counseling was given to obese, hypertensive, and diabetic patients.
- Counseling was also provided to patients regarding the right posture to avoid physical pains and aches.

Doctor Consultation OPDs Report (Gurugram Outreach)

DATE		GYN	OBS	SKIN	ENT	GIT	GUT	CVS	RESP	ENDO	TOTAL
January 26	84	14	06	56	133	64	03	04	13	00	377
February 26	79	10	03	21	61	23	01	07	03	01	209
March 26	159	10	04	71	68	67	00	12	05	07	403
TOTAL	322	34	13	148	262	154	04	23	21	08	989

Pie chart showing various ailments reported



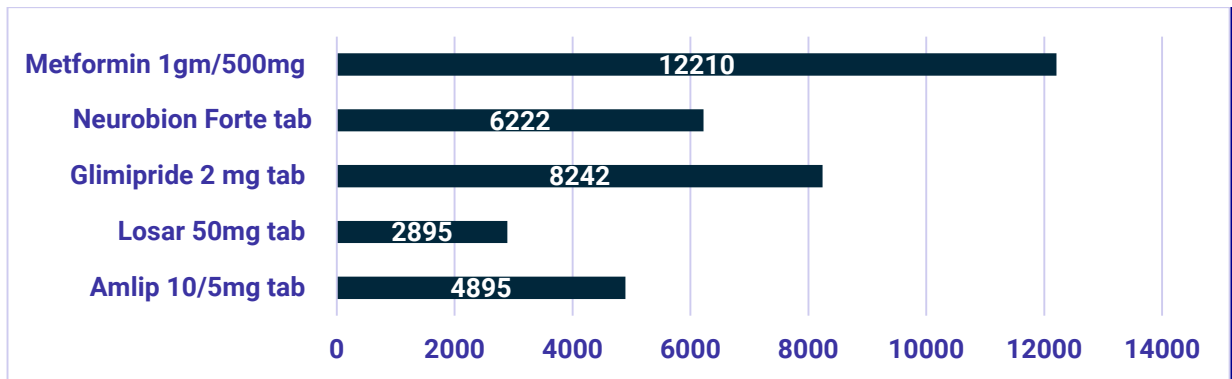
GEN	- General
GYNAC	- Gynecology
ENT	- Ear Nose Throat
GIT	- Gastrointestinal Tract
CVS	- Cardiovascular system
RESP	- Respiratory system
ENDO	- Endocrine system



1.4) Most Frequently Prescribed Drugs

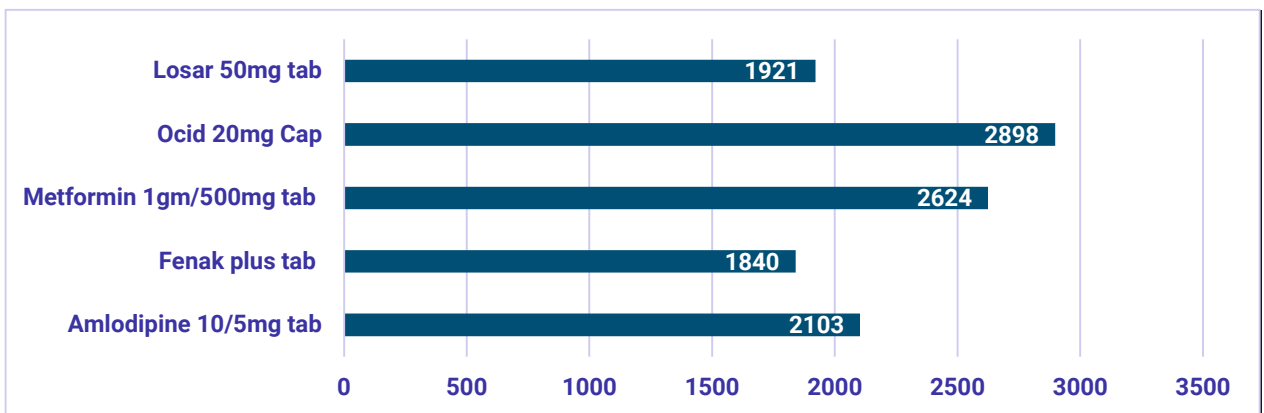
Below is a list of the most commonly prescribed medications for conditions such as Hypertension, Diabetes, Neuralgia and Gastritis

Delhi



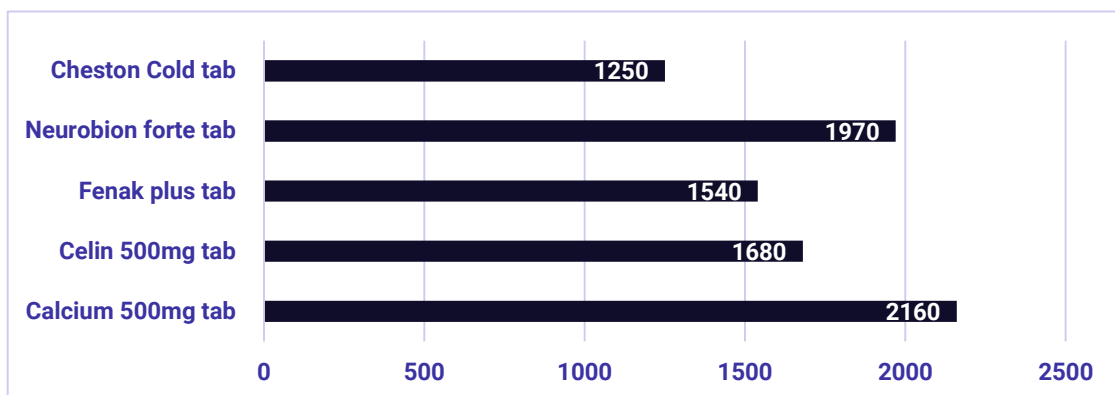
Below is a list of the most commonly prescribed medications for conditions such as Hypertension, Diabetes, Body ache, Allergies and Gastritis

Gwal Pahari



Below is a list of the most commonly prescribed medications for conditions such as Hypocalcemia, Body ache, Neuralgia, Cough and cold with Fever, Osteopenia and Osteoporosis.

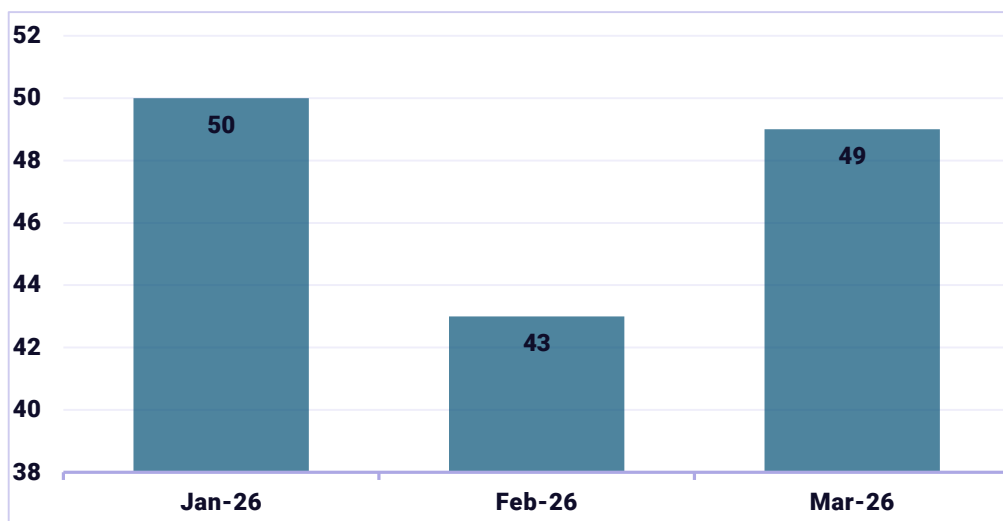
Gurugram Outreach



1.5) Antenatal care

Adharshila started with women's healthcare clinics which extended to family healthcare services. Given the elevated Maternal Mortality Ratio in India, we commit to delivering optimal care to women, particularly during pregnancy. An overview of the escalating number of women seeking ANC checkups at our center is outlined below:

No. of Pregnant women registered with Adharshila for Antenatal Care



S. No.	Months	Balance of last month	New ANC patients	Deliveries	Miscarriage	Ongoing
1	January 26	52	05	07	00	50
2	February 26	50	05	11	01	43
3	March 26	43	08	02	00	49

S. No.	Months	Home Delivery	Institutional delivery		Female	Male	Not Inform
			Caesarian Delivery	Normal delivery			
1	January 26	00	01	06	04	03	00
2	February 26	00	02	09	04	07	00
3	March 26	00	00	02	01	01	00

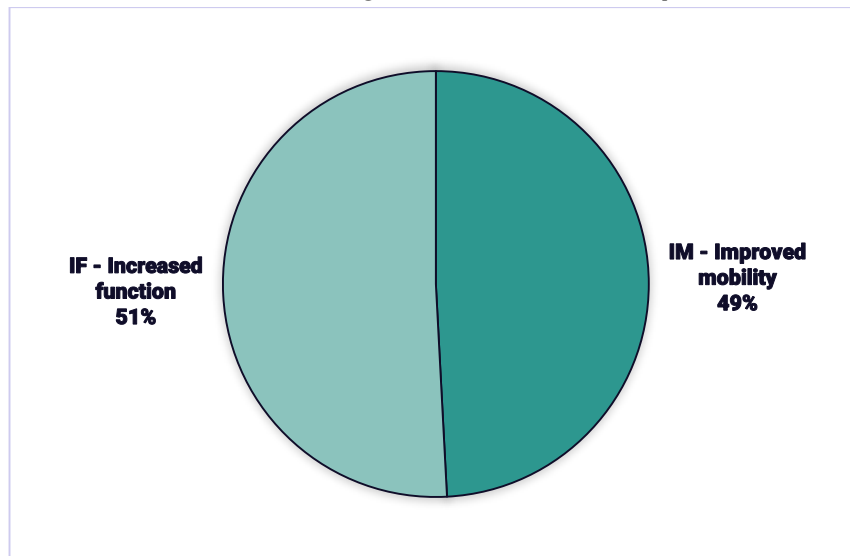
During the last quarter, a total of **52 ANC (Antenatal Care) patients** were registered, with **18 new registrations** in this quarter. Out of these, **20 successful deliveries** were reported, along with one miscarriage. Among these, **3 were caesarean deliveries**, and **17 were normal deliveries**. As of now, the health center is actively providing antenatal care to **49 ongoing ANC patients** and **20 lactating mothers**.

2. PHYSIOTHERAPY OPDs

OPDs were conducted at Gwal Pahari by the health team

- 120 doctor's consultations were availed by the patients
- 61 patients reported increased body function.
- 59 patients reported improved mobility.
- All 120 patients reported effective pain management through medical intervention and physiotherapy support.
- Counselling was also provided to patients regarding the right posture to avoid physical pains and aches.
- An awareness session was also conducted to patients regarding Improving Posture for a Healthier Life.

Pie chart showing various ailments reported



3. HOMEOPATHY OPD

1173 beneficiaries reached out to Homeopathy OPDs this quarter at Tigri, Kalkaji, Jaitpur, and Harkesh Nagar centers. The following table shows the number and type of patients that were provided consultations during the months of January, February, and March 2026.

S. NO	MONTH	GEN	GYN	GIT	RES	SKIN	ENT	TOTAL
1.	January 26	205	54	86	17	80	17	459
2.	February 26	131	43	73	26	48	12	333
3.	March 26	165	55	69	14	62	16	381
	TOTAL	501	152	228	57	190	45	1173



4. Other Highlights of This Quarter

4.1. Eye Checkup and BMD (Bone Mineral Density) Screening Camp

Date – 22nd January 2026

Location – Family Health Centre, Gwal Pahari

Number of Beneficiaries – 143

A comprehensive Eye Check-up, Chronic Kidney Disease (CKD), and Bone Mineral Density (BMD) Screening Camp was successfully organized at Bandhwadi on **22nd January 2026**. The initiative aimed to deliver preventive health screening services and promote early detection of visual, renal, and bone health disorders among the local community. The

camp witnessed active participation from **143 individuals** who registered for various health assessments.

Eye Care Services - A total of **145 patients** underwent detailed ophthalmic examinations.

Key Findings:

1. **Refractive Errors: 89 patients** were diagnosed and provided corrective spectacles on-site.
2. **Cataract Cases: 49 patients** were identified and enlisted for free cataract surgeries.
3. **Referrals: 4 patients** referred to tertiary eye care centers for advanced management.
4. **Eye Drops Distributed: 116 patients** received preventive or therapeutic medication.

These efforts contributed to the early management of visual impairments and enhanced community awareness regarding eye health.

Bone Mineral Density (BMD) Screening - A total of 88 participants underwent Bone Mineral Density assessment to evaluate bone health and detect early signs of osteopenia or osteoporosis.

Key Findings:

1. **Normal:** 05 participants
2. **Osteopenia:** 52 participants
3. **Osteoporosis:** 13 participants
4. **Severe Osteoporosis:** 18 participants
5. **Medications Provided:** A total of 83 participants received appropriate medications and calcium/vitamin D supplementation based on their BMD results, along with counselling on dietary modifications, physical activity, and preventive bone health practices. Overall, the camp was well-received and played a vital role in early diagnosis, treatment initiation, and community health awareness.

4.2. Eye Checkup and BMD (Bone Mineral Density) Screening Camp

Date – 19th March 2026

Location – Family Health Centre, Harkesh Nagar

Number of Beneficiaries – 155

A successful multi-specialty health camp focusing on Eye Check-up, Bone Mineral Density (BMD), and CKD screening was conducted at Adharshila Health Centre, Harkesh Nagar, aimed at promoting early detection and preventive healthcare in the community.

Eye Care Services - A total of **155 patients** underwent detailed ophthalmic examinations.

Key Findings:

- **Refractive Errors: 85 patients** were diagnosed and provided corrective spectacles on-site.
- **Cataract Cases: 29 patients** were identified and enlisted for free cataract surgeries.
- **Referrals: 7 patients** referred to tertiary eye care centers for advanced management.
- **Eye Drops Distributed: 112 patients** received preventive or therapeutic medication.

These efforts contributed to the early management of visual impairments and enhanced community awareness regarding eye health.

Bone Mineral Density (BMD) Screening - A total of 143 participants underwent Bone Mineral Density assessment to evaluate bone health and detect early signs of osteopenia or osteoporosis.

Key Findings:

- **Normal:** 15 participants
- **Osteopenia:** 87 participants
- **Osteoporosis:** 25 participants
- **Severe Osteoporosis:** 16 participants
- **Medications Provided:** A total of 83 participants received appropriate medications and calcium/vitamin D supplementation based on their BMD results, along with counselling on dietary modifications, physical activity, and preventive bone health practices. Overall, the camp was well-received and played a vital role in early diagnosis, treatment initiation, and community health awareness.

4.3. Eye Check up Camp

Date – 13th February 2026

Location – Govt. School, Gwal Pahari

Number of Beneficiaries – 176

The eye health camp at Gwal Pahari Health Centre was conducted on 13 February 2026 for students of the Government Senior Secondary School, Gwal Pahari, Gurugram, covering classes from III to XII. A total of 176 students participated in this camp.

Key Findings

- 67 students were identified with low vision and were provided with spectacles to correct refractive errors. 48 students received eye drops to address minor ocular concerns such as dryness, irritation, or infections.
- The remaining students were found to have normal vision and were advised on maintaining good eye health practices.

Outcomes

The camp successfully addressed students' immediate needs by providing corrective spectacles and medication. It also emphasised the importance of regular eye screenings in school settings, ensuring that vision problems are identified early before they impact learning and overall well-being.

4.4. General Health Camp For Construction Labourers at Trehan IRIS

Date – 20th February 2026

Location – Noida

Number of Beneficiaries – 217

As part of its ongoing commitment to preventive and community healthcare, a General Health Check-Up Camp was organized for construction labourers at Trehan IRIS. The initiative aimed to improve access to essential healthcare services for a vulnerable workforce, with a focus on early detection and management of general health conditions and bone health-related issues.

Objectives

- To provide accessible and quality primary healthcare services at the worksite
- To assess bone health through Bone Mineral Density (BMD) screening
- To identify high-risk individuals and enable timely referral for specialized care
- To promote awareness on preventive healthcare and occupational health risks

Scope of Services

- The camp offered a comprehensive range of services, including general medical consultations, distribution of prescribed medications, blood investigations, BMD assessments, and administration of Tetanus Toxoid (TT) injections.

Participation and Coverage

- Total Registrations: 217
- OPD Consultations with Medication: 215
- BMD Screenings: 191
- TT Injections Administered: 127
- Blood Investigations Conducted: 167

Key Findings and Clinical Observations

- The camp enabled the screening of a substantial number of beneficiaries, facilitating early identification of individuals with general and occupational health concerns.
- A total of 26 individuals were identified with significant clinical concerns requiring further evaluation and follow-up care. Detailed findings and patient-specific recommendations have been documented and shared separately for necessary action.

4.5 Awareness Session on Menstrual Health and Hygiene

Date – 9th & 10th February 2026

Location – Harkesh Nagar, Kalkaji and Tigri

Number of Beneficiaries – 311

As part of the Health Education & Community Outreach initiative for February 2026, a series of awareness sessions on menstrual hygiene were successfully conducted across Harkesh Nagar, Kalkaji, and Tigri, reaching a total of 311 participants and ensuring broad community engagement. The sessions focused on enhancing awareness regarding menstrual hygiene management, including the importance of using sanitary pads, correct usage practices, and safe and hygienic disposal methods. A total of **139 adolescent girls** were provided with **sanitary pads** to support improved menstrual health practices. Additionally, other participants, including young focal groups and team members, actively attended and benefited from the sessions. Special emphasis was placed on the importance of nutrition for adolescent girls, particularly the inclusion of iron-rich foods such as jaggery (gud) and roasted gram (chana) to help prevent anaemia and promote overall well-being. Furthermore, more than 311 packets of gud-chana were distributed among community members, skill-affected youth, and team members as part of the nutrition support component. Overall, the initiative demonstrated effective community outreach, strengthened awareness on menstrual hygiene, and contributed to the promotion of preventive health practices among the target population.

4.6 Awareness session on Low Cost Nutrition

Number of Sessions – 2+2

Location – Gwal Pahari and Harkesh Nagar

Number of Beneficiaries – 25+18

The session was designed to help people understand how to eat healthily without spending a lot of money. It aimed to provide practical advice on budget-friendly nutrition, enabling participants to make informed choices about their diet while managing their expenses effectively. The session was dedicated to teaching participants how to maintain a nutritious diet while keeping expenses low. This could involve discussing affordable healthy food options, effective meal planning, and strategies for making the most out of limited resources.

4.7 Awareness session on Diabetes

Number of Sessions – 2+6

Location – Gwal Pahari and Harkesh Nagar

Number of Beneficiaries – 21+104

The session aimed to educate participants about diabetes, including its causes, symptoms, and management strategies. The event provided practical advice on diabetes prevention and care, helping participants understand how to manage the condition through lifestyle

changes and treatment options. Role of nutrition in managing Type 1 and Type 2 diabetes. It provided participants with guidance on proper dietary habits to control blood sugar levels and improve overall health., the event offered practical advice on managing diabetes through nutrition, tailored to the needs of both types.

4.8 Awareness session on Pre Pregnancy Nutrition

Number of Sessions – 6+2

Location – Gwal Pahari and Harkesh Nagar

Number of Beneficiaries – 122+29

This session emphasized the critical role of nutrition in preparing for pregnancy, focusing on how a well-balanced diet can enhance fertility, improve reproductive health, and support a healthy pregnancy. Participants learned about the essential nutrients such as folic acid, iron, calcium, and omega-3 fatty acids, which are vital for fetal development and reducing the risk of complications during pregnancy.

The session also highlighted the importance of maintaining a healthy weight, managing stress, and avoiding harmful substances like alcohol, tobacco, and excessive caffeine. Practical advice included meal planning, incorporating nutrient-dense foods, and understanding the impact of specific food groups on hormone regulation and overall reproductive health.

4.9 Awareness session on Kangaroo Mother Care

Number of Sessions – 4+2

Location – Gwal Pahari and Harkesh Nagar

Number of Beneficiaries – 107+22

This session focused on Kangaroo Mother Care (KMC), a proven method of caring for newborns through skin-to-skin contact between the mother and baby, especially beneficial for preterm or low birth weight infants. The event highlighted how KMC promotes bonding, stabilizes the baby's body temperature, enhances breastfeeding, and improves overall health outcomes for newborns.

Participants were educated on the proper techniques for practicing KMC, its physiological and emotional benefits, and its role in reducing neonatal mortality and morbidity rates. The session also provided practical demonstrations, allowing attendees to better understand the process and its implementation. By the end of the session, participants gained valuable knowledge to support newborn health and strengthen maternal-infant connections.

4.10 Awareness Session on Anemia

Date – 19th February 2026

Location – Harkesh Nagar

Number of Beneficiaries – 45

An awareness session on anaemia was conducted at the Primary Health Center, Harkesh Nagar. A total of 45 beneficiaries participated in the session. The participants were educated in detail about the causes, symptoms, prevention, and treatment of anaemia. Special emphasis was given to the importance of a balanced diet, intake of iron-rich foods, and regular health check-ups. During the session, beneficiaries were also provided with personalized guidance based on their health conditions, and their queries were addressed effectively. The session served as an important initiative towards increasing awareness about anaemia and promoting healthier practices within the community.

4.11 Awareness Session on Budget-Friendly Nutrition and Healthy Eating

Number of Sessions – 03

Location – Harkesh Nagar

Number of Beneficiaries – 65

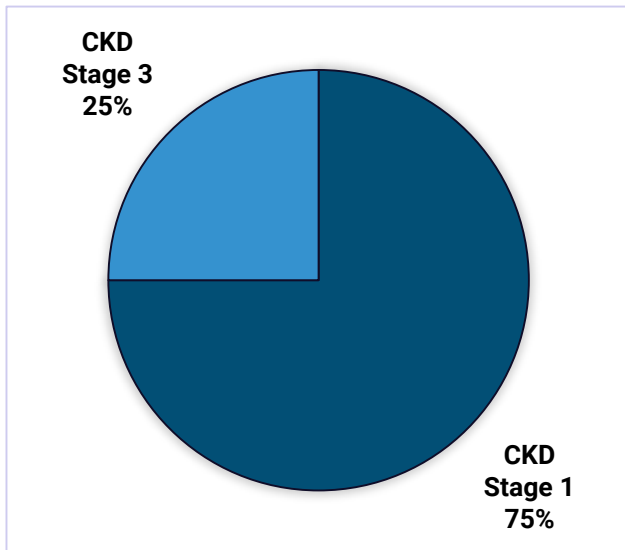
The session was designed to raise awareness about maintaining a healthy and balanced diet within a limited budget. It aimed to provide participants with practical, cost-effective nutrition guidance to support informed food choices while managing household expenses. The session covered affordable and nutritious food options, simple meal-planning techniques, and practical strategies to optimize nutritional intake using locally available and low-cost resources. Of calcium, vitamin D, and regular exercise in preventing osteoporosis.

4.12 Population screening FOR CKD/DM/HT patients

We encourage individuals to visit our centers or camps for a comprehensive health check-up. Those diagnosed with diabetes and hypertension are especially urged to participate in CKD screening, which includes monitoring blood pressure and blood sugar levels which includes proteinuria, KFT tests to identify the status of kidney functions. Our services cater to beneficiaries of all age groups, with a particular focus on individuals aged 40 and above. The screening camp aims to identify those at risk of or affected by CKD, with a specific emphasis on enhancing kidney health, raising awareness about the disease, and reducing its impact on the community's overall well-being.

CKD screening Camps

Month	Location	No of CKD Screening Camps held	No of Patients Screened for CKD	No. of Hypertensive & diabetic	No. of Urine dipstick test	KFT	No. Of CKD Patients
January 2026	Gwal Pahari	127	65	36	01	01	01 patient diagnosed with Stage 1 CKD
Feb 2026	Noida	208	50	45	02	02	01 patient diagnosed with Stage 1 CKD and 01 with Stage 3
March 2026	Harkesh Nagar	127	52	43	04	00	04 patients with Stage 1 CKD
	Total	462	167	124	07	03	05



Across the CKD screening camps, a total of **five individuals** were identified with varying stages of chronic kidney disease. **Four individuals were diagnosed with advanced CKD**, including **three cases of Stage 1 CKD** and **one case of Stage 3 CKD**. The Patient diagnosed with Stage 3 were promptly referred to Safdarjung Hospital for further evaluation and specialized nephrology management.

5. CASE STUDIES

5.1 Effective Management of Uncontrolled Diabetes Mellitus with Neuropathy

Registration number: 19864

Centre Location: Gwal Pahari

Medical History: The patient presented with uncontrolled Type 2 Diabetes Mellitus, indicated by an HbA1c level of 8.4%, along with complaints of neuralgic pain suggestive of diabetic neuropathy.

Intervention: The patient was initiated on a structured treatment regimen, including Metformin 1 g twice daily, Glimepiride (GP 2) twice daily, and Neurobion once daily. She also received comprehensive dietary counselling focusing on balanced nutrition and lifestyle modifications to support glycemic control and overall health.

Outcome: The patient demonstrated excellent adherence to treatment and lifestyle recommendations. Over follow-up visits, her blood glucose levels stabilized, and her HbA1c reduced significantly to 5.6%, indicating optimal glycemic control. Her neuralgic symptoms also resolved, resulting in a significant improvement in her overall quality of life.

5.2 Management of Severely Uncontrolled Diabetes Mellitus with Neuropathy and Vitamin D Deficiency

Registration number: 21994

Centre Location: Gwal Pahari

Medical History: The patient presented in March 2026 with severely uncontrolled Type 2 Diabetes Mellitus, as indicated by an HbA1c level of 12.3%. His fasting blood sugar was 246 mg/dL and postprandial blood sugar was 405 mg/dL. He also reported neuralgic symptoms and was found to have Vitamin D3 deficiency, with levels at 16.8 ng/mL.

Intervention: A comprehensive treatment plan was initiated, including Metformin 1 g twice daily, Glimepiride (GP 3 mg) in the morning and (GP 2 mg) in the evening. Weekly Vitamin D3 supplementation and daily Neurobion were prescribed to address deficiency and neuropathic symptoms. The patient also received detailed counselling on dietary modifications and lifestyle changes to improve glycemic control.

Outcome: The patient demonstrated good adherence to treatment and regular follow-up. Over time, there was significant improvement in glycemic parameters, with fasting blood sugar reducing to 118 mg/dL and postprandial blood sugar to 153 mg/dL. His symptoms also subsided, resulting in improved overall health status.

5.3 Management of Herpes Infection with Hypertension

Registration number: 31058

Centre Location: Gwal Pahari

Medical History: The patient presented with complaints of a herpes rash over the back along with a known history of hypertension. Clinical evaluation indicated the need for symptomatic management of the skin lesions along with optimization of blood pressure control.

Treatment Plan: The patient was initiated on a comprehensive treatment plan including antihypertensive medications (Amlodipine and Losartan) for blood pressure control. For symptomatic relief of the skin condition, Calamine lotion was prescribed for local application, along with Paracetamol (PCM 650 mg) for pain relief and Cetirizine for itching. Additional medications included Mox and Neurobion once daily to support recovery and nerve health. The patient was also provided with detailed counselling on dietary and lifestyle modifications.

Outcome: The patient demonstrated good adherence to the prescribed treatment and follow-up schedule. On subsequent visits, his blood pressure was well controlled, and there was complete resolution of the herpes rash with significant relief from pain and discomfort, indicating an effective response to the management plan.

5.4 Management of Sciatica

Registration number: 36257

Centre Location: Gwal Pahari

Medical History: The patient presented on 16 January 2026 with complaints of lower back pain radiating to the knees, associated with stiffness in the back and tingling sensation over the thigh region. The pain was reported to worsen with forward bending and prolonged sitting. Clinical assessment indicated features suggestive of sciatica. Special tests, including the Straight Leg Raise (SLR) test and Slump test, were found to be positive.

Treatment Plan: The patient was managed with a combination of physiotherapy modalities, including deep heat therapy, Transcutaneous Electrical Nerve Stimulation (TENS), and ultrasound therapy (UST). A structured therapeutic exercise program was initiated, comprising isometric exercises, strengthening exercises, bridging exercises, and back extensor strengthening. Additional exercises included knee-to-chest movements, as well as hamstring and calf stretching. Postural correction techniques were also emphasized as part of the rehabilitation plan.

Outcome: The patient demonstrated significant improvement over the course of treatment. There was a marked reduction in pain, with complete resolution of tingling sensations. The

patient is now able to perform daily activities with minimal discomfort, walk independently without difficulty, and shows no evidence of muscle tightness, indicating a positive response to the intervention.

5.5 Management of Bilateral Knee Osteoarthritis

Registration number: 36317

Centre Location: Gwal Pahari

Medical History: The patient presented on 09 March 2026 with complaints of severe knee pain and swelling, particularly on the posterior aspect of the knee. Clinical evaluation confirmed bilateral osteoarthritis of the knees, associated with discomfort and restricted range of motion. Special tests, including the valgus and varus stress tests, were positive, indicating compromised knee stability. Radiological findings (X-ray) revealed joint space narrowing.

Intervention: A structured physiotherapy management plan was initiated, focusing on pain relief and improvement in strength and mobility. Treatment included cryotherapy (ice packs) to reduce swelling and tenderness, Transcutaneous Electrical Nerve Stimulation (TENS) for pain relief, and ultrasound therapy (UST) to reduce inflammation and promote tissue healing. A therapeutic exercise program was also implemented, including quadriceps strengthening exercises, dynamic quadriceps training, ankle-toe movements, and calf stretching. Lifestyle modification advice was provided to support long-term joint health.

Outcome: Following completion of the treatment sessions, the patient reported significant reduction in pain and improvement in range of motion. She was able to resume daily activities with reduced discomfort and improved mobility. Additionally, the patient demonstrated positive changes in lifestyle habits, contributing to better overall management of her condition.

5.6 Management of Fungal Infection (Tinea Cruris)

Registration number: 36740

Centre Location: Village Kanhai

Medical History: The patient presented with complaints of itching, redness, and multiple skin eruptions in the groin region, consistent with a fungal infection (jock itch/tinea cruris).

Intervention: Modalities: The patient was treated with a combination of topical and oral antifungal medications. In addition, he received counselling on maintaining proper personal hygiene, avoiding triggering factors, and preventive measures to reduce recurrence.

Outcome: The patient showed significant improvement, with a marked reduction in symptoms and lesions observed during the follow-up visit on 10 April 2026, compared to the initial visit on 09 January 2026. The response to treatment indicates effective management of the condition.

5.7 Management of Dermatitis

Registration number: 37762

Centre Location: Kanhai Village

Medical History: The patient presented on 14 July 2025 with a history of dermatitis, complaining of itching, scaling, and pigmentation of the affected skin areas.

Treatment Plan: The patient was managed with topical corticosteroids and oral antihistamines. He was also counselled regarding avoidance of triggering allergens and advised on appropriate skin care practices to prevent exacerbations.

Outcome: The patient showed noticeable improvement in symptoms over time. By the last follow-up visit on 25 March 2026, there was a significant reduction in itching, scaling, and pigmentation, indicating a positive response to treatment and adherence to medical advice.

5.8 Early Detection of Chronic Kidney Disease in a Patient with Type 2 Diabetes Mellitus

Registration Number: 25500

Centre Location: Noida

Medical History: The patient is a known case of Type 2 Diabetes Mellitus for the past one year and was on irregular and suboptimal antidiabetic treatment. He presented asymptotically during a routine health screening camp for general health evaluation. There was no previously documented history of hypertension or chronic kidney disease.

During screening, his blood pressure was recorded at 153/87 mmHg, suggestive of previously undiagnosed hypertension. Bone Mineral Density assessment revealed a T-score of -2.72, indicative of osteoporosis.

As part of routine diabetic screening, a urine dipstick test was performed, which revealed significant proteinuria (4+) with no glucosuria. In view of these findings, further investigations were advised to evaluate renal function.

Investigations: Laboratory investigations showed an HbA1c level of 7.70%, indicating suboptimal glycemic control. Kidney function tests revealed elevated serum creatinine at 2.10 mg/dL and a reduced estimated glomerular filtration rate (eGFR) of 34 mL/min/1.73m². Serum uric acid levels were also elevated at 8.10 mg/dL.

Assessment: Based on clinical evaluation and investigation findings, the patient was diagnosed with chronic kidney disease (CKD) – Stage 3b. The probable etiology includes diabetic nephropathy due to uncontrolled diabetes, along with a possible contribution from previously undiagnosed hypertension. The patient was also found to have osteoporosis.

Intervention: The patient was counselled regarding the severity of his condition and the importance of strict control of blood sugar and blood pressure. He was immediately referred to a nephrologist at Safdarjung Hospital for further evaluation and specialized management.

Outcome: This case underscores the critical role of routine screening in identifying asymptomatic yet serious conditions such as chronic kidney disease in high-risk individuals. Early detection and timely referral are essential in preventing disease progression and ensuring better long-term outcomes.

5.9 Successful Management of Hypertension

Registration number: 34803

Centre Location: Gurugram Outreach

Medical History: The patient has been a regular beneficiary of the Gurgaon Outreach OPD since 6 June 2025. At her initial visit, she presented with elevated blood pressure (160/93 mmHg) and was diagnosed with hypertension. She had no prior structured treatment, necessitating timely medical intervention to prevent long-term complications.

Intervention: The patient was initiated on oral antihypertensive medication. In addition, she received comprehensive counselling on lifestyle modifications, including adherence to a low-salt diet, regular physical activity, and maintenance of a healthy daily routine. Continuous patient education and counselling were reinforced during each follow-up visit to ensure sustained compliance.

Outcome: The patient demonstrated excellent adherence to both medication and lifestyle recommendations, with regular follow-ups enabling close monitoring and necessary adjustments in her treatment plan. Over a period of six months, her blood pressure showed consistent improvement. At her most recent follow-up on 25 March 2026, her blood pressure was recorded at 112/69 mmHg, indicating effective control of hypertension.

This case highlights the importance of regular follow-up, patient education, and community-based healthcare interventions in achieving successful long-term management of hypertension.

5.10 Successful Management of Contact Dermatitis

Registration number: 37762

Centre Location: Gurugram Outreach

Medical History: The patient presented with complaints of persistent itching, scaling, and skin pigmentation. On examination, he was diagnosed with contact dermatitis, likely due to environmental allergens.

Intervention: He was treated with topical corticosteroids, oral antihistamines, and antifungal soap. Counselling was provided on allergen avoidance, proper skin care, and personal hygiene. Regular follow-ups ensured monitoring and guidance.

Outcome: The patient showed significant improvement, with reduction in itching and scaling and visible improvement in skin condition, indicating effective management. This case highlights the importance of early diagnosis, appropriate treatment, and continuous follow-up in successfully managing contact dermatitis.

5.11 Management of Secondary Infertility with Recurrent Pregnancy Loss

Registration number: 877

Centre Location: Harkesh Nagar

Medical History: The patient presented with a history of secondary infertility and two previous missed abortions occurring between 8–10 weeks of gestation. These repeated pregnancy losses resulted in significant emotional distress and concern regarding her reproductive health.

Intervention: The patient was provided with detailed counselling regarding potential causes of recurrent pregnancy loss, the importance of timely conception, and awareness of the fertile window. Continuous guidance, emotional support, and reassurance were provided during follow-up visits to encourage adherence to recommendations and reduce anxiety.

Outcome: With consistent counselling and adherence to medical advice, the patient successfully conceived in January 2026. An early pregnancy ultrasound conducted in March 2026 confirmed a viable intrauterine pregnancy of 7 weeks and 5 days, with positive cardiac activity. The outcome brought significant relief and satisfaction to the patient and her family, highlighting the effectiveness of counselling, patient compliance, and timely intervention in managing infertility and recurrent pregnancy loss.

5.12 Management of Hypertension with Diabetes Mellitus

Registration number: 33312

Centre Location: Harkesh Nagar

Medical History: The patient is a known case of hypertension and diabetes mellitus for the past five years. He initially presented with significantly elevated blood pressure readings of 169/93 mmHg, which further increased to 177/110 mmHg on a subsequent visit, indicating poor control of his condition.

Intervention: The treatment plan was promptly reviewed, and antihypertensive medications were adjusted accordingly. The patient received detailed counselling on lifestyle modifications, including adherence to a low-salt diet, regular physical activity, and strict compliance with prescribed medications. Regular follow-up visits were ensured for continuous monitoring and reinforcement of counselling.

Outcome: With consistent follow-up, adherence to treatment, and positive lifestyle changes, the patient demonstrated significant improvement. By March 2026, his blood pressure was well controlled, with a recorded reading of 116/66 mmHg. This case highlights the importance of timely intervention, patient awareness, and regular monitoring in effectively managing chronic conditions such as hypertension and diabetes mellitus.

5.13 Management of Diabetes Mellitus with Controlled Hypertension

Registration number: 22617

Centre Location: Jaitpur

Medical History: The patient is a known case of hypertension and diabetes mellitus for the past five years and has been on regular treatment. During her visit, her blood pressure was within normal limits at 120/79 mmHg; however, her blood sugar levels were elevated, with fasting blood sugar at 114 mg/dL and postprandial blood sugar at 258 mg/dL, indicating inadequate glycemic control.

Intervention: The treatment plan was reviewed, and appropriate modifications were made to her antidiabetic medications. The patient received counselling on dietary modifications, regular physical activity, and the importance of adherence to prescribed medications. Regular follow-up visits were ensured for continuous monitoring and support.

Outcome: With consistent follow-up and adherence to lifestyle modifications and treatment, the patient showed significant improvement. Her blood pressure remained on the lower side during subsequent visits, leading to discontinuation of antihypertensive medication. Additionally, her blood sugar levels improved markedly, with the latest readings showing fasting blood sugar at 103 mg/dL and postprandial blood sugar at 144 mg/dL. This case highlights the effectiveness of proper management and strong patient compliance in achieving optimal health outcomes.

5.14 Hypertension Management

Registration number: 23047

Centre Location: Harkesh Nagar

Medical History: The patient has been visiting the health centre since September 2024 and is a known case of hypertension. At the time of her initial visit, her blood pressure was recorded at 166/106 mmHg, indicating poorly controlled hypertension.

Intervention: The patient was initiated on antihypertensive medication and received comprehensive counselling on lifestyle modification, including dietary changes and physical activity. Regular follow-up visits were ensured, during which continuous counselling and monitoring were conducted to support adherence to treatment and lifestyle recommendations.

Outcome: Over time, the patient demonstrated significant improvement in blood pressure control, with readings reducing to 138/90 mmHg on 11 February 2025. Continued adherence to treatment and follow-up resulted in further stabilization, with her most recent blood pressure recorded at

117/81 mmHg on 24 March 2026. As her blood pressure remained within normal limits for several months, antihypertensive medication was placed on hold after achieving sustained control on maintenance dosage.

5.15 Management of Hypertension

Registration number: 17407

Centre Location: Harkesh Nagar

Medical History: The patient has been visiting the health centre since December 2023 and is a known case of hypertension. At the time of her initial visit, her blood pressure was recorded at 170/107 mmHg, indicating uncontrolled hypertension.

Intervention: The patient was initiated on antihypertensive medication and received detailed counselling on lifestyle modifications, including dietary changes and physical activity. She was encouraged to adhere to regular follow-up visits, during which continuous monitoring and counselling were provided to support treatment compliance.

Outcome: The patient showed gradual improvement in blood pressure control, with readings reducing to 133/78 mmHg on 20 January 2026. She has been consistent with follow-up visits and adherence to prescribed treatment and lifestyle recommendations. Her most recent blood pressure, recorded on 07 April 2026, was 129/81 mmHg, indicating that her blood pressure is now well-maintained within the normal range.

5.12 Management of Type 2 Diabetes Mellitus with Hypertension

Registration number: 32379

Centre Location: Harkesh Nagar

Medical History: The patient is a known case of Type 2 Diabetes Mellitus with associated hypertension and initially presented with poorly controlled blood sugar levels and elevated blood pressure. On her first visit dated 05 December 2024, her fasting blood sugar was 262 mg/dL, postprandial blood sugar was 419 mg/dL, and blood pressure was recorded at 153/102 mmHg.

Intervention: The patient was initiated on oral antihyperglycemic agents along with antihypertensive medications. She received comprehensive counselling on dietary modifications and the importance of maintaining a physically active lifestyle. Regular follow-up visits were ensured, with continuous monitoring and reinforcement of counselling at each visit to support adherence to treatment and lifestyle changes.

Outcome: The patient demonstrated significant improvement in both glycemic control and blood pressure over time. On 28 October 2025, her blood pressure was recorded at 124/64 mmHg, with fasting blood sugar at 110 mg/dL and postprandial blood sugar at 118 mg/dL. Her latest readings on 20 January 2026 showed fasting blood sugar at 70 mg/dL, postprandial blood sugar at 114 mg/dL, and blood pressure at 132/75 mmHg. She is currently stable and

maintained on maintenance doses, reflecting effective long-term management and adherence to treatment.

6. ADHARSHILA - A MULTIFACETED TRUST

Adharshila: Empowering Communities through Healthcare, Education & Livelihood

- **Family Health Centre:** Provides affordable, inclusive healthcare in family medicine, ophthalmology, gynaecology, dermatology, and homeopathy, with free medicines and subsidized diagnostics.
- **Education Program:** Promotes school retention and literacy through activity-based learning and remedial classes.
- **Digital Skills Training:** NIIT-certified courses in MS Office, Excel, cybersecurity, and spoken English enhance youth employability.
- **Adharshila Renal Care Project:** Strengthens renal services in government hospitals and expands CKD screening and Capacity Building of Paediatric dialysis care at Safdarjung, RML, and LHMC.

Adharshila's Impact:

- **3,40,000+** healthcare consultations
- **19,000** students supported through education
- **22,000** youth trained in livelihood skills
- **81,000+** Dialysis sessions & CKD screening with diet counselling in Renal Care Project

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