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• SEPTEMBER 2026 | VOLUME 1 | ISSUE 3 •

From the Executive Desk

Thank you for the tremendous response to our previous edition—our new readership records and soaring altmetric scores reflect the vibrant engagement across our community!

This month is dedicated entirely to our students, proudly celebrating our “Scholars in the Making.” In a monumental leap for postgraduate inquiry, we secured **26 ICMR- DHR MD/MS/MDS grants (17 Medical, 9 Dental)** – a remarkable progression from 15 in 2025 (12 Medical, 3 Dental) and just 1 in 2024.

What makes this milestone profoundly meaningful is that the vast majority of these approved projects originate from our active clinical departments, translating bedside observations into robust inquiry.

The celebration doesn't end there: our young scholars have also bagged a prestigious research fellowship and a Best Research Paper award this cycle. It is truly students all the way!

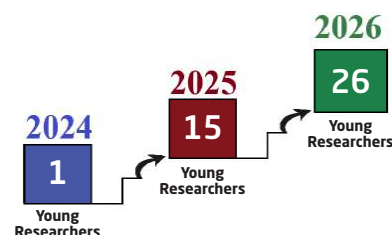
To our budding clinician-scientists and dedicated mentors: your grit is shaping the future of healthcare.

Let's keep this phenomenal momentum going!
Good luck and God Speed!

Prof. Dr. V. N. Mahalakshmi
Vice Chancellor, SDU



Prof. Dr. V. N. Mahalakshmi
Vice Chancellor, SDU



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MEDICAL COLLEGE & HOSPITALS



SANTOSH
DENTAL COLLEGE & HOSPITALS



SANTOSH
Faculty of Allied Health Sciences

The Global Narrative

9 BILLION DNA CHANGES. ONE AI ATLAS.

SOURCE: DeepMind's AlphaGenome Atlas charts the potential effects of billions of DNA changes
By Ewen Callaway, Nature | September 8, 2026

Dr. Sayantani Karmakar,
Assistant Professor, DBMR, SDU

What happens when just one letter in our DNA changes?

Google DeepMind's AlphaGenome is bringing researchers closer to answering this question. As reported by Nature, the new AlphaGenome Atlas provides AI-generated predictions for the potential effects of around nine billion possible single-letter changes across the human genome.

What is AlphaGenome?

AlphaGenome is an artificial intelligence model developed by Google DeepMind to analyse long stretches of DNA and predict how genetic changes may influence biological processes. Rather than focusing only on protein-coding genes, it can also examine regulatory regions of the genome DNA sequences that help control when, where and how strongly genes are expressed.

Why is the Atlas important?

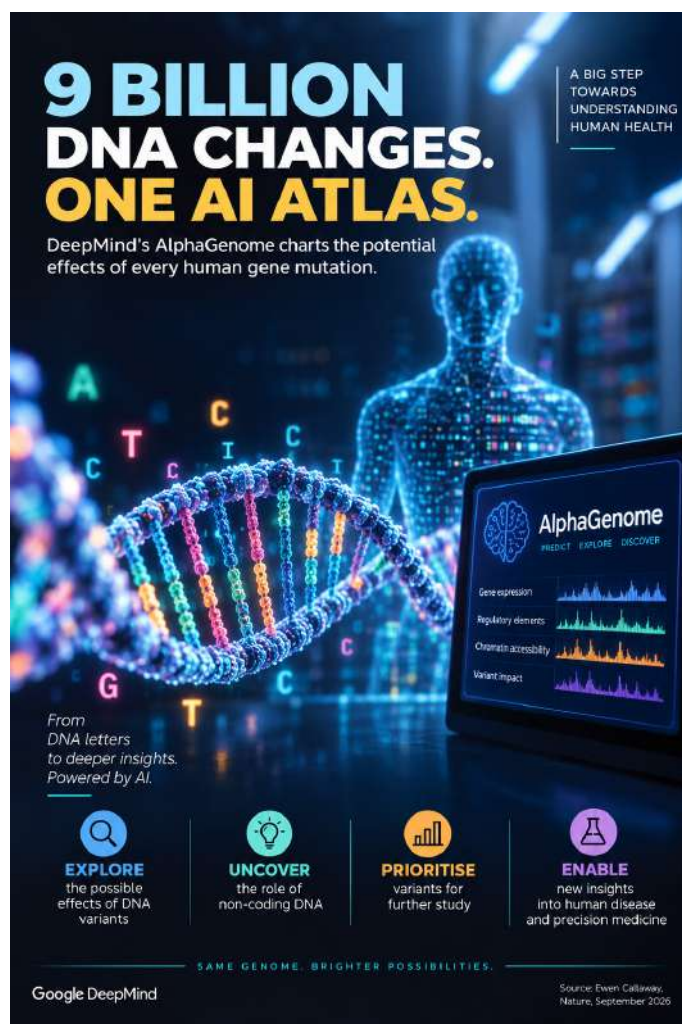
- Helps researchers explore the possible biological effects of individual DNA variants.
- Can support the study of disease-associated and rare genetic variants.
- Provides new opportunities to investigate the largely non-coding regions of the genome.
- Can help researchers prioritise variants and formulate hypotheses for laboratory studies.
- Demonstrates how AI and genomics can work together to accelerate biological research.

From Prediction to Experiment

The Atlas is a computational resource, not a replacement for laboratory or clinical validation. AI predictions can help researchers identify promising variants and biological mechanisms, but experimental studies are still needed to determine whether a predicted effect occurs in real biological systems.

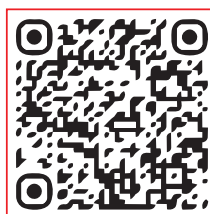
A Glimpse into the Future of Genomic Research

AlphaGenome highlights a rapidly growing intersection of artificial intelligence, genomics, bioinformatics and molecular biology. By helping researchers navigate billions of possible DNA changes, such tools could make it easier to move from genetic variation to testable biological hypotheses and ultimately contribute to a deeper understanding of human disease and precision medicine.



The Big Takeaway

*Bringing genomic insights closer to patient care
AlphaGenome could help clinicians and
clinician-researchers
Interpret the potential impact of genetic variants.
Support disease and treatment research.
Identify variants for further clinical investigation.
Advance personalized and precision medicine.*



**Scan this QR code to
read the Full Article.**

Journal Showcase

Conceptualize wit(h)nessing as an ethical and pedagogical means of engaging lived experience with healthcare education

Frontiers in Public Health | Public Health Policy

**Mark A. Vicars,
Renaissan Dutta,
Emilie Das,
Dr. Shuvojit Moulik,**
Professor & HOD, DBMR, SDU

(Santosh Deemed to be University, Ghaziabad in collaboration with Victoria University, Melbourne; CWF Labs, Bolpur; and Civilian Welfare Foundation, Kolkata)

The simple problem

Many medical schools now have a lecture on LGBTQIA+ health. That sounds like progress.

This paper says: look at how that lecture is taught. Too often the message is still – these patients are a risk group, a problem, a “special case.” The slide is new. The harm is old.

In India and much of the Global South, that habit is mixed with another one: copying Western labels and missing local lives (for example Hijra), as if one imported module fits every body.

The team effort:

Three jobs, stated plainly:

Look hard at how medical schools still shrink queer lives into pathology, HIV risk, or “gender identity disorder.”

Study body pedagogies – learning from how people actually live in, and move through, clinics that were never built for them.

Test **wit(h)nessing**: not watching a patient from the end of the bed, but standing with them – so the curriculum learns from lived expertise, not only from the textbook’s default body (usually male, cisgender, and “unmarked”).

The team worked in India, not in an imported Western checklist. Hijra, and other locally named lives, do not always fit the Global North’s LGBT boxes. Copy-paste modules can erase that history even while claiming “inclusion.”

They spoke with LGBTQIA+ students in medicine, nursing and physiotherapy, and with educators, across Delhi-NCR and West Bengal. Then they ran workshops that treated the body as a teacher, not a case vignette.

Why care?

If a student only meets queer and trans people as a disease chapter, they take that gaze into OPD.

Patients feel it. They delay care. They edit their story. No lab test will show that loss.

Better teaching here is not “be nice.” It is fewer missed histories, fewer humiliations, and a clinic where the chart does not demand that someone shrink to fit it.



The big takeaway

*Inclusion is not a module.
It is whether the person in the
chair is treated as a problem
to fix – or as someone whose
life can teach the next doctor.*



**Scan this QR code to
read the Full Article.**

**One paper. Four authors. A Santosh
name on a question every health
campus still must answer.**

Scholar Sphere: Research Decoded

Bridging Research and Society

The Role of Vitamin D and VDR Gene Polymorphism (FokI) of Genetic Susceptibility for Thyroid Cancer in North Indian Population

Core Question: Thyroid malignancies present an escalating clinical challenge within the North Indian demographic, necessitating a deeper understanding of underlying molecular vulnerabilities. This case-control study investigated the potential correlation between serum Vitamin D deficiencies and variations in the Vitamin D Receptor (VDR) gene. By evaluating these parameters, the research aimed to determine how genetic variations and nutritional status interact to influence individual susceptibility to thyroid oncogenesis.

Key Finding: The investigation established a statistically significant correlation between the VDR FokI genetic variant—specifically the 'ff' genotype—and an elevated risk of developing thyroid cancer. This specific genetic configuration was predominantly observed in malignancy patients compared to healthy controls. Additionally, while the patient cohort demonstrated lower mean serum Vitamin D concentrations, the genetic variance emerged as the more definitive indicator of risk.

Societal / Practical Impact: These insights contribute to clinical oncology by identifying a potential molecular biomarker for targeted risk stratification and early screening protocols. Uncovering these genetic predispositions enables clinicians to design personalized preventative strategies and targeted vitamin monitoring for high-risk cohorts. Ultimately, this translational research bridges the gap between molecular genetics and proactive, community-based oncological care.

Authors: Mrs. Mansi Modi and Dr. Juhi Aggarwal



Mrs. Mansi Modi

PhD Scholar, Department of Biochemistry
Santosh Medical College & Hospitals



Dr. Juhi Aggarwal

Professor & Head, Department of Biochemistry,
Santosh Medical College & Hospitals



Upcoming Event: Visit to SATHI Foundation, IIT Delhi – Sonipat

Santosh Deemed to be University just signed a partnership with SATHI Foundation.

This is the day it stops being a memorandum and becomes a corridor.

On 7 October, a small group from the university – faculty, clinicians, scientists, students – will walk the SATHI Foundation at IIT Delhi's Sonipat campus: guided tour, talk with the people who run the instruments, and a chance to explore new ideas.

On the floor: confocal microscopy, Cryo-TEM, 3D printing, mass spectrometry, FESEM, and the rest of a national analytical kit most teaching hospitals only cite in grant proposals.

Only 12 participants.

Register with name, department, designation or course, research area, and what you need the facility to do:



**Scan this QR Code
for Registration**



Upcoming Event

Admissions Open for Ph.D Programmes (Full Time / Part Time - September 2026)

NAAC accredited Santosh "Deemed to be University" is a unique Institution providing quality Medical, Dental & AHS Education, Health Care Services, Research and Innovation through excellent academic & infrastructural facilities and a home for dedicated and advanced research activities.

Faculty of Medicine			
Name of the Department	No. of Seats	Name of the Department	No. of Seats
Anatomy / Medical Anatomy	4	Neonatology (Paediatrics)	4
Biochemistry / Medical Biochemistry	8	Psychiatry	2
Haemato Pathology (IHBT Dept.)	4	Ophthalmology	2
Community Medicine	4	Anesthesiology	2
Obstetrics & Gynecology	4	Oto-Rhino-Laryngology	2
Respiratory Medicine	4	Dermatology, Venerology & Leprosy	2
General Medicine	4	Radiology (MD Qualified)	2
General Surgery	4		

Faculty of Dentistry			
Name of the Department	No. of Seats	Name of the Department	No. of Seats
Maxillofacial Surgery	2	Integrated Implantology	2
Orthodontics & Dentofacial Orthopaedics	2	Paediatrics & Preventive Dentistry	2
Conservative Dentistry & Endodontics	2	Prosthodontics & Crown and Bridge	2
Periodontology	2	Oral Maxillofacial Pathology & Microbiology	2

Faculty of Allied Health Science (AHS)	
Name of the Department	No. of Seats
Optometry	4
Clinical Nutrition & Dietetics	4
Medical Imaging Technology (M.Sc. Qualified)	2
Hospital Administration	4

Faculty of Science & Technology	
Name of the Department	No. of Seats
Biochemistry (Cell Biology)	7
Biophysics (Cancer Biology)	3
Bioinformatics (Multidisciplinary)	3
Biotechnology	4

Detailed application is available on the link:

<https://www.santosh.ac.in/phd-notice>



Online submission of applications alone will not be considered. Physical Copy accompanied by DD shall reach the Office of the Registrar within the prescribed deadline mentioned below under the head - Time Line:
Email: phdadmissions@santosh.ac.in

Application Fee: ₹1500/-
DD drawn in favour of:
Santosh Deemed to be University
Payable at: DELHI

NOTE:- SELECTION METHOD:

THROUGH ENTRANCE TEST (Online)

- **Paper - 1:** Research Methodology - MCQ based (Online)
- **Paper - 2:** Subject Specific - MCQ based (Online)
- Interview/Viva Voce (Online)

Time Line	
Last date for submission of filled in application with Demand Draft (D.D)	05 th Oct. 2026
Issue of Hall Tickets for Online Entrance Test (Including Roll No., ID & Password)	08 th Oct. 2026
Date of Online Entrance Examination (10:00 AM)	10 th Oct. 2026
Date of Online Interview / Viva Voce / Presentation (Exact date and time for the interview will be <u>intimated by email only to the eligible candidates who have appeared and secured 50% marks (aggregate) in the Entrance Test</u>)	12 th Oct. 2026
Declaration of Results of Selection list	15 th Oct. 2026
Date of Commencement of Ph.D. Course	26 th Oct. 2026

Applications with all enclosures should be sent in a sealed envelop with a mention on top

APPLICATION FOR PH.D. (FULL TIME / PART TIME) to The Registrar,
Santosh Deemed to be University, No-1, Santosh Nagar, Ghaziabad, NCR Delhi

Tel: 0120 - 4933350/51/52 | **Fax No.** 0120-4933360

E-mail: phdadmissions@santosh.ac.in | **website:** www.santosh.ac.in

FOR FURTHER DETAILS, CONTACT: ADMISSION CELL: +91 78385 54410/04/01

Research Collaboration Hub

Don't Queue Outside a Cabin. Book the Living Lab.

Interdisciplinary Research Collaboration Portal

A living lab is not another committee with a nicer name.

It is research happening where the hospital already is – students, clinicians, biomedical faculty and a protocol in the same conversation – instead of a student walking three corridors to find out who will even look at a draft.

The key strength of this project is its peer-led approach to tobacco-use prevention. Instead of limiting prevention to conventional awareness sessions, the project aims to involve school students as active participants in promoting healthier choices among their peers.

Santosh has put that idea on a page.

The **Living Lab Model** portal is a small door into the Central Research Facility: book a **one-to-one**, send the request, a copy lands in the student's inbox so the task does not vanish into WhatsApp.



*Scan the QR code
to work with us*

The screenshot shows the 'Living Lab Model' portal for the Department of Biomedical Research at Santosh Deemed to Be University. The header includes 'Research areas' and 'Consultation' links. The main title 'Living Lab Model' is prominently displayed, followed by the subtitle 'Interdisciplinary Research Collaboration Portal'. Below this, a description states: 'A collaborative space for biomedical discovery, expert guidance, and research support.' Two buttons are visible: 'Start a consultation' and 'Explore research areas'. On the right, a 'NEW EVENT' section announces a 'Research Colloquium' on '18 SEPTEMBER - 2026'. The lower section is divided into two parts: 'RESEARCH EXPERTISE' with a dropdown menu showing 'Cancer Research' (described as 'Cancer biology, cancer-related diseases, treatment approaches, and translation of findings into practical healthcare applications.') and 'Schedule One-to-One Chat'. The chat scheduling form includes fields for 'Name' (with a sub-field for 'Full name'), 'Mobile number' (with a sub-field for '10-digit mobile number'), and 'Email address'.

What “living lab” is supposed to mean here

- The teaching hospital is the laboratory – real patients, real labs, real constraints – not a poster of a laboratory.
- The student is not a petitioner. They are a collaborator with a form and a named assignee.
- Guidance is interdisciplinary on purpose: a dental question may need a statistician; a ward question may need a biochemist. The portal exists so that hand-off is a click, not a rumour.
- The colloquium is the public half: one afternoon where drafts leave the cabin and meet a room.

Join us. Name the problem. Let us assist you.

They Didn't Just Submit a topic. They Opened the Door.

A Santosh-led Research Topic is now live at *Frontiers in Oncology*

Most researchers wait for a journal to call for papers.

This time, the call has Santosh names on it.

Dr. Shuvojit Moulik, Dr. Sanchaita, and Dr. Alak Manna proposed a Research Topic to *Frontiers in Oncology*:

"Thermal Reprogramming of the Tumor Immune Microenvironment: From Molecular Mechanisms to Clinical Translation."



Topic editors



Dr. Shuvojit Moulik

Professor and HoD, DBMR
Santosh Deemed to be University



Dr. Sanchaita Misra

Assistant Professor
Santosh Deemed to be University



Dr. Alak Manna

Mayo clinic,
Florida, USA

The topic has been selected. Manuscripts can now be submitted through Frontiers in Oncology or any participating Frontiers journal under this banner.

That is not a small administrative tick. A Research Topic is a curated scientific room: the editors set the question, invite the field, and steer a collection that other groups will cite for years. Heat, immunity, and the tumour microenvironment sit at the junction of cancer biology, immunology, and translation – exactly the kind of problem a biomedical research campus should be willing to host, not only to follow.

From a proposal to a platform

The field is now open for the Santoshians to showcase their work and publish in the related topic

One selected topic. Three editors. An open door for the next manuscript – including yours.

Investigators working on tumour immunology, thermal biology, or translational oncology are invited to consider submitting under this Research Topic.

Extramural Engine

A Proud Count, not a Quiet One!!!

This campus does not only train specialists. It puts their theses on a national list.

17 MD/MS scholars from Santosh Medical College and Hospital have secured ICMR / DHR thesis support- the kind of grant that turns a bound volume into a funded investigation.

17 MD/MS scholars secured ICMR- DHR - MD/MS Thesis Funding



Prof. (Dr.) V. N. Mahalakshmi
Vice Chancellor



Dr. Alka Agrawal
Dean, SMCH

BIOCHEMISTRY



Student
Dr. Sourabh



Guide
Dr. Juhi Aggarwal

COMMUNITY MEDICINE



Student
Dr. Siddharth Katyal



Guide
Dr. Syed Hasan Nawaz Zaidi

DERMATOLOGY



Student
Dr. Ananya Kumar



Guide
Dr. Ram Chander

ENT



Student
Dr. Tinusha Rani



Guide
Dr. Tarun Malhotra

ENT



Student
Dr. Simranjit Kaur



Guide
Dr. Tarun Malhotra

GENERAL MEDICINE



Student
Dr. Gaurav Sehrawat



Guide
Dr. Anupam Kumar Singh

GENERAL MEDICINE



Student
Dr. Siddharth Singh



Guide
Dr. Anupam Kumar Singh

OBG



Student
Dr. Monam Tripathi



Guide
Dr. Manisha Gupta

OBG



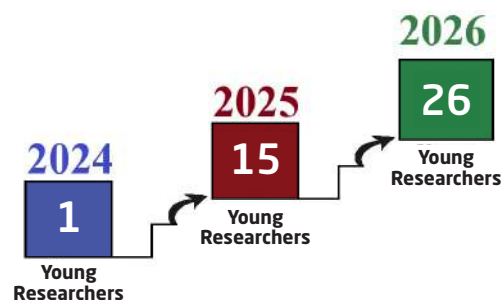
Student
Dr. Priya Kumari



Guide
Dr. Devika Mor

This achievement reflects the students' dedication, academic excellence and commitment to research, as well as the invaluable mentorship and support of their guides.

Congratulations to all the scholars and mentors!



17 MD/MS scholars secured ICMR- DHR - MD/MS Thesis Funding

OPHTHALMOLOGY



Student
**Dr. Kratika
Saxena**



Guide
**Dr. Sarita
Aggarwal**

PAEDIATRICS



Student
Dr. Kush



Guide
Dr. Alka Agrawal

PAEDIATRICS



Student
**Dr. Jai Niket
Singh**



Guide
**Dr. Urmila
Jhamb**

PAEDIATRICS



Student
**Dr. Kritika
Garg**



Guide
**Dr. Veenu
Agarwal**

PAEDIATRICS



Student
**Dr. Aditya
Chauhan**



Guide
**Dr. Abhishek
Jain**

PATHOLOGY



Student
**Dr. Niharika
Malik**



Guide
**Dr. Swati
Singh**

PHYSIOLOGY



Student
**Dr. Milind
Mondal**



Guide
**Dr. Rinku
Garg**

TRANSFUSION MEDICINE/I.H.B.T



Student
**Dr. Kshetrimayum
Navani Devi**



Guide
**Dr. Saumya
Gaur**

Extramural Engine

A Proud Count, not a Quiet One!!!

9 MDS scholars from Santosh Dental College have secured ICMR / DHR thesis support- the kind of grant that turns a bound volume into a funded investigation.

Congratulations to all the scholars and mentors!

9 MDS scholars secured ICMR- DHR - MDS Thesis Funding



Prof. (Dr.) V. N. Mahalakshmi
Vice Chancellor



Dr. Akshay Bhargava
Director - Research, Dean - Faculty of Dentistry
& Director - Santosh Startups Forum

ENDODONTICS



Student
Dr. Gourish Poddar



Guide
Dr. Chetna Arora

ORAL PATHOLOGY



Student
Dr. Surbhi Grover



Guide
Dr. Kanika Bhalla

ORAL PATHOLOGY



Student
Dr. Meenu Chauhan



Guide
Dr. Kanika Bhalla

ORTHODONTICS



Student
Dr. Krati Jeetendra Nath



Guide
Dr. Rajiv Ahluwalia

ORTHODONTICS



Student
Dr. Amey Deepak Sangar



Guide
Dr. Ashutosh

ORTHODONTICS



Student
Dr. Vibhav



Guide
Dr. Tina Chugh

PEDIATRIC & PREVENTIVE DENTISTRY



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PEDIATRIC & PREVENTIVE DENTISTRY



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Guide
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PROSTHODONTICS



Student
Dr. Kavita Banga



Guide
Dr. Rajiv Kumar Gupta

Research Promotion

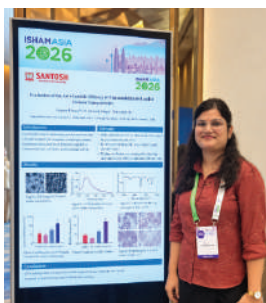
This September, the work has a new pincode: Kuala Lumpur

“Evaluation of the Anti-Candida Efficacy of Cinnamaldehyde-Loaded Gelatin Nanoparticles in a Murine Model”- Old kitchen molecule. New delivery coat. A question the congress came to hear – does it work when the bug is in a living host, not only in a dish?”

Dr. Gunjan Uttam, Assistant Professor, Department of Biomedical Research, has secured **ICMR travel support of up to ₹1.5 lakhs** to present at the ISHAM Asia Congress 2026, Kuala Lumpur, 10-12 September 2026.

ISHAM is the big room for medical mycology. Asia is watching fungi that do not read textbooks.

One grant. One congress. One Assistant Professor taking Candida to Malaysia and bringing the questions home.



Dr. Gunjan presenting her work at
ISHAM ASIA 2026 conference



Interaction with **Dr. Amir Seyedmousavi**,
Director of Mycology and Parasitology, NIH Clinical
Centre, Bethesda, Maryland, USA

Tomorrow Today in Research (TTIR) India

10 September 2026 · Vivanta, Dwarka · ~90 research leaders from the NCR and beyond

Elsevier's TTIR is not a product launch with sandwiches. It is their flagship room for vice-chancellors, deans of research, librarians and research-office leads – the same family as the 2025 Amrita conclave. The brief on the table: **AI across the research lifecycle, research intelligence (Scopus / SciVal / Pure), societal impact, integrity, and being findable outside India.**

How this conference benefits Santosh?

- **Think quality, not quantity:** Santosh should focus on fewer, stronger research projects that improve patient care—not simply publish more papers.
- **Connect the dots:** Bring faculty profiles, grants, ethics approvals, clinical trials, patents, and hospital data into one clean, reliable research system.
- **Use AI responsibly:** Create clear rules for generative AI and strengthen checks for plagiarism, image manipulation, and research misconduct.
- **Play to Santosh's strengths:** Prioritise women's cancers, community health, regenerative medicine, mental health, and palliative care.
- **Grow visibility:** Build meaningful international partnerships, support young researchers, reward real-world impact, and manage publishing costs carefully.
- **Better funding opportunities, stronger rankings, greater global recognition, safer research, valuable industry partnerships, and improved patient outcomes.**



Next 90 days: Benchmark research performance, launch an AI policy, select flagship projects, and start a secure clinical-data platform.

Research Ethics

The Honest Balance: How Clinical Equipoise Protects Patients in Medical Research

Prof.(Dr.) V.N. Mahalakshmi

Vice Chancellor, Santosh Deemed to be University

Ever wonder how doctors can look patients in the eye, flip a coin, and say, "Let's see which treatment you receive"?

At first glance, leaving a medical decision to chance sounds alarming. Yet this randomized coin toss represents the highest ethical standard in medical research. It hinges entirely on a concept known as clinical equipoise—the principle of genuine, collective uncertainty within the expert medical community about whether a therapy is truly better, worse, or equal to existing care.

The Metaphor of the Balance Scale

Picture an old-fashioned balance scale sitting in a laboratory. On the left pan sits Treatment A (the current standard therapy), and on the right sits Treatment B (an innovative new alternative).

If robust scientific evidence already weighs down one side, tilting the beam, running a trial is indefensible. It is unethical to give any patient an option known to be inferior. A trial can only ethically launch when the scales rest in honest equilibrium because competent specialists disagree on the superior approach.

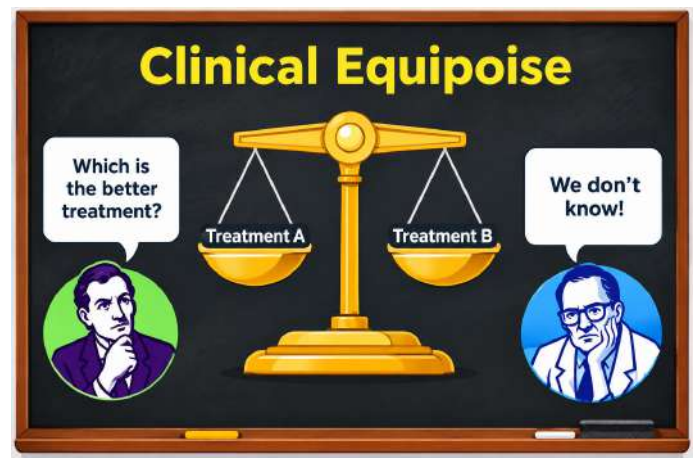
In knee ligament surgery, for instance, surgeons debate whether keyhole repair or open reconstruction yields better long-term joint stability. Because neither side has conclusive evidence, randomizing patients between the two is fair, safe, and necessary to discover the truth.

The Breakthrough: Shifting from One Mind to the Community

For years, trial design struggled with a fatal flaw called theoretical equipoise – the demand that an individual investigator have a perfect 50/50 state of personal indifference. In reality, seasoned doctors almost always nurture small hunches based on personal training or recent successes. Demanding absolute indifference from every doctor would stall clinical research entirely.

In 1987, ethicist Benjamin Freedman resolved this impasse by defining clinical equipoise. Freedman argued that the ethical benchmark should not rest on a single doctor's hunch, but on consensus uncertainty across the broader medical community. Even if Doctor X personally suspects a new drug is better, enrolling patients remains ethical as long as the wider medical fraternity is split or lacks definitive proof.

Crucially, this community standard never overrides a physician's primary fiduciary duty to the person in front of them. If a doctor recognizes that an experimental arm poses



specific clinical dangers to a particular patient's unique health profile, their professional judgment overrides the trial, and the patient must not be randomized.

Red Flags: When the Balance Is Breached

Equipoise is broken whenever a study is designed or continued despite proof that one arm is clearly superior or dangerous.

- **Pre-Trial Design Flaws:** Testing an experimental drug against a dummy placebo when a proven, life-saving therapy already exists (such as withholding known antibiotics in bacterial meningitis) is an outright ethical violation. Other breaches include using "straw man" comparators—dosing the control drug suboptimally just to ensure the sponsor's drug looks superior.
- **Mid-Trial Discoveries:** If early, unblinded data midway through a study reveals an experimental blood thinner cuts strokes by 80% with fewer bleeds, equipoise evaporates on the spot. Continuing to randomize vulnerable patients to the control arm becomes indefensible.

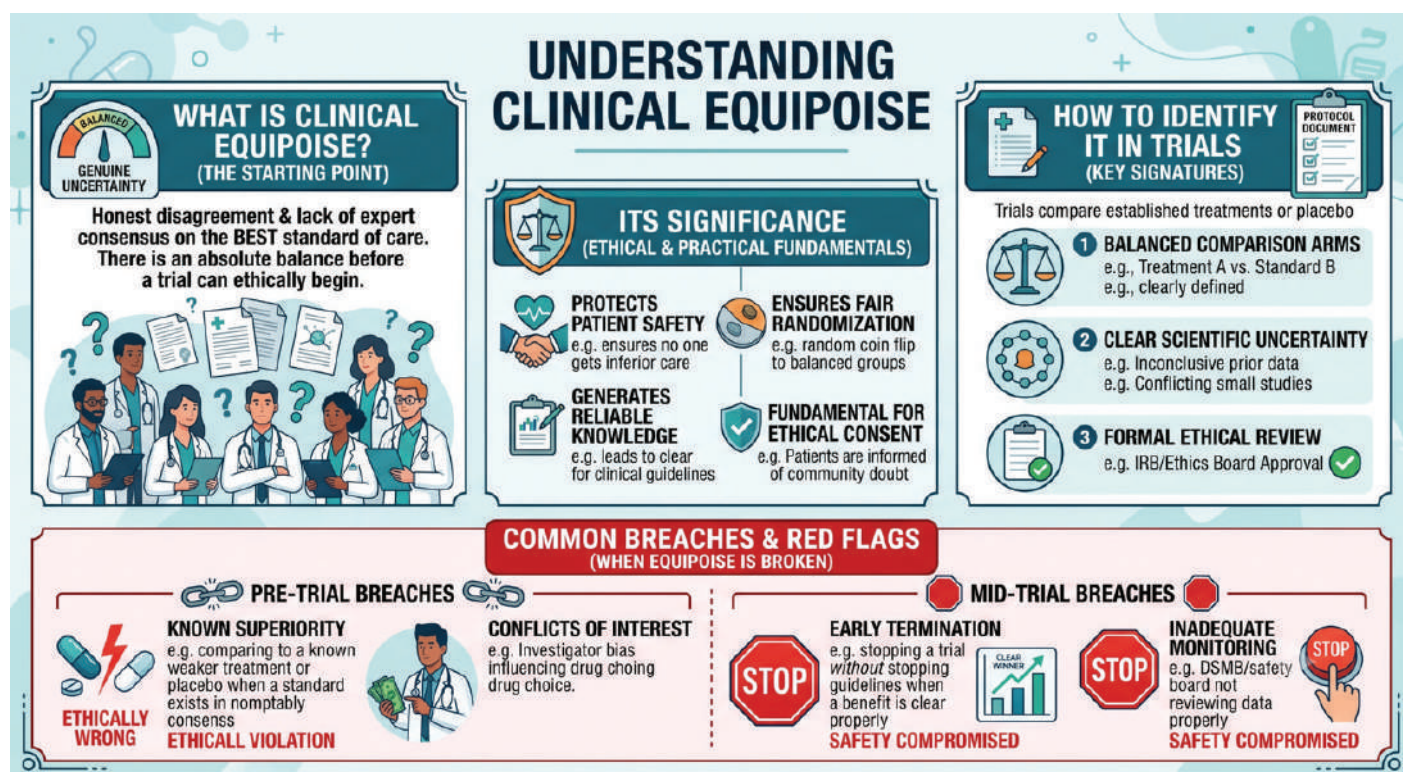
Safeguards: How Science Protects Fairness

Modern clinical research prevents breaches through multiple structured layers of governance:

- **Independent Watchdogs (DSMBs):** Unblinded committees of outside physicians and statisticians periodically review hidden data to blow the whistle if safety or efficacy thresholds are crossed.
- **Pre-Set Eject Buttons:** Mathematical stopping rules establish clear statistical boundaries before the trial launches, halting the study automatically if outcomes prove conclusively decisive early on.
- **Smart Trial Adaptations:** Adaptive algorithms automatically steer higher percentages of incoming participants toward better-performing arms in real time.

- **Rescue and Crossover Paths:** Built-in escape hatches ensure patients deteriorating on a control arm can instantly switch to the active therapy without administrative delay.

Clinical equipoise proves that medical progress does not begin with claiming to know all the answers. It begins with the humility to admit collective uncertainty, paired with the structural safeguards to find the truth without compromising patient care.



References

1. **Freedman B.** Equipoise and the ethics of clinical research. N Engl J Med. 1987;317(3):141-145.
2. **Kukla R.** The dual fiduciary obligations of physician-researchers and the role of clinical equipoise. J Med Philos.2007;32(3):279-299.
3. **World Medical Association.** World Medical Association Declaration of Helsinki: ethical principles for medical research involving human subjects. JAMA. 2013;310(20):2191-2194.
4. **Rothman KJ, Michels KB.** The continuing unethical use of placebo controls. N Engl J Med. 1994;331(6):394-398.

Academic Integrity Corner

The Extra Name on the Cake

Gift Authorship: Credit for a Cake You Never Baked

Imagine a group project. Two people did the work. Four names appear on the cover – including a senior who never opened the file, never wrote a sentence, and would struggle to explain the results if asked. The extra names look grand. Science has not changed. Only the guest list has.

That is gift authorship (also called honorary or guest authorship): putting a name on a paper when that person did not earn a place as an author. It is one of research’s politest bad habits and one of its most damaging.

Nobody invents data. Somebody invents credit. And once credit is invented, responsibility quietly walks out of the room.

The Mystery of the Invisible Co-Author

The “Sir/Madam Must Be There” reflex. A head of department, a grant holder, or a senior colleague is added “out of respect,” even if they never designed the study, analysed a number, or touched the draft.

CV mathematics. Promotions and grants still count papers. Adding a name feels like a small kindness. Ten years later it is a fake bookshelf.

You-scratch-my-byline. “I put you on mine; you put me on yours.” The paper becomes a favour, not a record of work.

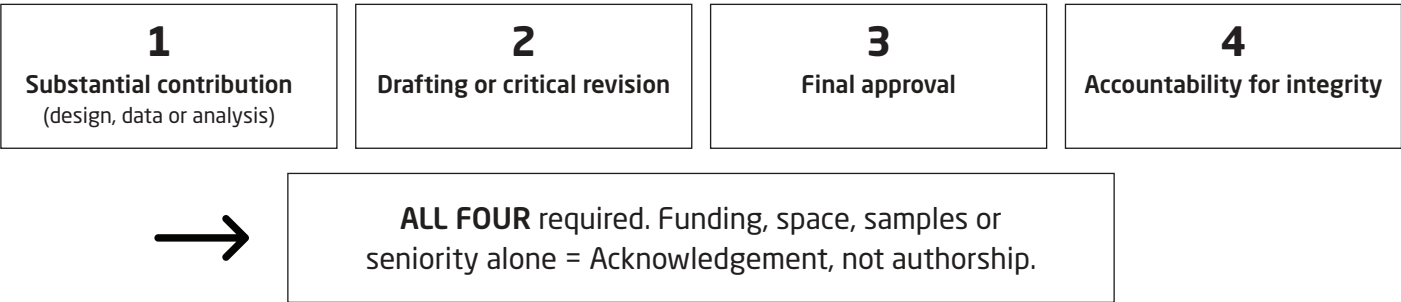
Access mistaken for authorship. Samples, patients, lab space, or a signature are real help. They are not the same as writing and owning the science. That help belongs in Acknowledgements – not in the author line.

Gift Authorship: When the byline does not match the work

1. WHAT IT IS



2. THE FOUR-TICKET RULE (ICMJE)



3. WHY IT HARMS INTEGRITY



Why Should Anyone Care?

When something goes wrong, the wrong people are in the dock. Authorship means: I can explain this paper and I will stand behind it. A gifted author often cannot. The junior who actually did the work is left holding the bag.

CVs start to lie.

Committees cannot tell who built the study and who only lent a surname. Real first authors get crowded. Honorary last authors collect medals they did not win.

Power flows uphill. Students and early-career staff do the midnight work. Established names collect the byline. That is not mentorship. That is a free ride.

Readers get a false map. We treat author lists as a guide to expertise. Gift authorship draws that map in disappearing ink.

The Four-Ticket Rule (Who Actually Gets a Seat)

You helped design the study, or collect, analyse, or interpret the data – in a real way, not a ceremonial one.

You wrote part of the paper or revised it with real intellectual input.

You approved the final version.

You agree to be answerable for the whole work – including the bits you did not personally run.

Funding, rooms, reagents, “I run this department,” or “I was generally around” are not tickets. Acknowledge them in the manuscript. Do not add a name as authors.

How to Spot It – and How to Stop Inviting Ghosts

Write the guest list before the party. At the protocol stage, decide who will be an author and for what. Revisit it if the work changes. Do not wait until submission night.

Use contribution labels. Journals increasingly ask who did Conceptualization, Analysis, Writing, and so on. Empty or copy-paste statements are a red flag.

Thank generously. Promote accurately. Mentors and funders can be acknowledged with warmth. They should not be sprinkled onto every byline by default.

Do not trade names. Collaboration is sharing ideas and labour. It is not swapping souvenirs.

Treat disputes as integrity issues. “That is just our culture” is not a defence. If a name cannot defend the methods, it does not belong on the paper.

The Big Takeaway

A paper is not a wedding invitation.

*It is a public statement of who did the work and who will answer for it.
Gift authorship does not honour a colleague. It quietly edits the truth.
If a name cannot explain the experiment, defend the numbers, and
accept the blame if the numbers are wrong – that name is a guest,
not an author.*

References

1. **International Committee of Medical Journal Editors.** Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals. Updated 2025. <https://www.icmje.org/recommendations/>
2. **Meursinge Reynders, R.A., Ter Riet, G., Di Girolamo, N., Cavagnetto, D. and Malički, M., 2024.** Honorary authorship is highly prevalent in health sciences: systematic review and meta-analysis of surveys. *Scientific Reports*, 14(1), p.4385.

Clinical trial floor

Bridging Innovation, Research and Patient Care

01. Consultancy project: From Plasma to Patients: An Industry Partnership with Impact

What if surplus plasma, not required for transfusion, could become a lifesaving therapy?

The Department of IHBT's consultancy with Reliance Life Sciences Pvt. Ltd. makes this possible and is a prime example of healthcare expertise meeting industry capability.

Surplus Fresh Frozen Plasma (FFP), prepared under controlled conditions using specialized equipment, is transferred after donated blood has tested negative for transfusion-transmitted infections and the plasma is not required for hospital use. Fractionation transforms this plasma into valuable plasma-derived therapeutics, including albumin, immunoglobulins, and coagulation factors like Factor VIII. These targeted therapies support patients with bleeding disorders, immune deficiencies, **severe burns, liver disease and other critical conditions.**



Dr. Mayurika Tyagi

Professor and Head
Dept. of Immunohaematology
and Blood Transfusion

Surplus plasma that would have been waste is fractionated – with Reliance Life Sciences – into albumin, immunoglobulins and clotting factors for patients who actually need them. Since 2022 the consultancy has brought in about ₹25 lakh, put back into the Blood Centre's machines, quality systems and safety – one unused bag, several extra lives.

One donation. More possibilities. Greater impact!!

02. Consultancy project: From local transport to ambulance: ICMR funds the missing curriculum!

The Department of Paediatrics is a site on a national ICMR multicentric project – Development and delivery of a pediatric transport curriculum and module – with Dr. Urmila Jhamb (Professor & HOD) as site PI and Dr. Abhishek Jain as site Co-PI.

12 tertiary hospitals share the map, government and private, every zone: MAMC Delhi (lead), PGIMER Chandigarh, Santosh Medical College Ghaziabad, AIIMS Bhubaneswar, KIMS Bhubaneswar, AIIMS Nagpur, Bharati Vidyapeeth Pune, AIIMS Bhopal, AIIMS Raipur, AIIMS Bibinagar, St. John's Bengaluru, CMC Vellore.

This work is a team effort. First the team monitors how a sick child travels- by own car, autorickshaw, ambulance – in about 500 paediatric cases per centre over a year, and what the vehicle, the driver, the EMT, the nurse and the emergency doctor already know. That gap analysis becomes the brief for a readiness tool (ambulance and emergency room) and a simulation-based curriculum. Then 8-10 workshops for ground teams, a second look at what stuck, and a list of why compliance still fails – a file meant for government planning, not only a journal.

A Ghaziabad site. A national grid. One question: can we stop treating the journey to hospital as luck?



Dr. Urmila Jhamb
PI of the project



Dr. Abhishek Jain
CO-PI of the project

Mentor Spotlight

5 years. Extramural funds for 2 STS students, 2 MDS projects and 1 Seed Money Grant

A short conversation with **Dr. Kanika Bhalla**

Question: What is your philosophy behind this success?

Dr. Bhalla. "I do not treat success as a chair or a certificate. It is humility and thankfulness. It is staying in motion, growing a little every year and knowing the work has changed a student's life, not only a CV. If the effort left something valuable behind, that is enough".

Question: Why do you like working with students?

Dr. Bhalla. "Because that is where the journey actually lives. You sit with them, you hear the problem they will not put in an email, you walk the protocol with them, and then you watch them become someone who can do it without you. Their trust, and their affection, is still the reason I say yes to the next student.

*One guide who did not treat the first win as the last.
The only STS mentor on this three-year list who came back and did it again.*



“ Research is not just about achieving a milestone; it is about creating something meaningful and helping the next generation learn how to create it themselves.

Dr. Kanika Bhalla
Professor, Department of Oral Pathology & Microbiology

Altmetric Highlight

Recognition that resonates!

Two editions in, and The Frontier is already proving something worth noting: good research, when told well, travels. Across LinkedIn, Instagram and WhatsApp, this edition didn't just land in front of people – it caught their attention, encouraged them to explore further and prompted them to share it within their own networks.

On LinkedIn, the newsletter reached 659 members and generated 1,065 impressions. But the more telling numbers came from what happened next – 1,457 clicks through to the full content and 1,474 engagements in total.

On Instagram, the edition recorded 3,074 views across 1,254 individual viewers, signalling a steadily widening audience rather than simply repeated engagement from the same set of followers.

And then there's WhatsApp – a growing community of 409 people who have chosen to follow The Frontier directly.



Research is moving beyond journals and reports to find new audiences, spark curiosity and travel across professional networks.
Seen. Explored. Shared. Remembered.
That is the impact The Frontier is building.

Students' Corner

A Fellowship on the Other Side!!

Dr. Sehrish Chaudhary · Trialect Observership

Some fellowships start with a flight. This one started with a lab on campus.

Dr. Sehrish Chaudhary has secured a Trialect observership fellowship. The funding route was walked with DBMR. Before the bigger room, she trained 15 days in the Department of Biomedical Research – methods, bench habits, the unglamorous grammar of a protocol that must travel.

That is the point of a students' corner worth printing: not only "someone went abroad," but someone was prepared at home.



Dr. Sehrish Chaudhary

Date: 31/08/2026

INVITATION LETTER FOR OBSERVERSHIP/FELLOWSHIP

To Whom It May Concern,

Subject: Invitation for Observership in Stem Cell and Regenerative Medicine

This letter is to confirm that **Dr. Sehrish Chaudhary**, a Junior Resident pursuing her MD in Immunohematology and Blood Transfusion at **Santosh Medical College & Hospital, Santosh Deemed to be University, Ghaziabad, India**, (passport no: U6090229), has been invited to undertake a **two- to three-week Observership in Stem Cell and Regenerative Medicine** at **Frankfurter Rotkreuz-Kliniken (Frankfurt Red Cross Hospital), Germany**, under the supervision of **Dr. Vasiliki E. Klaodimou**.

The observership is scheduled to take place in **November 2026**, with the exact dates to be finalized in consultation with Dr. Sehrish Chaudhary. It is tentatively planned for **9 November to 30 November 2026**.

CAHO SAKCON 2026 · National conference!!

Dr. Reetika Singh and **Dr. Saumya Sharma** from Department of Hospital Administration, took a Santosh ICU question to a national stage and came back with **second prize** in the paper presentation category at **CAHO SAKCON 2026 National Conference** held on 11th and 12th September at Amity University, Noida.



Dr. Reetika Singh



Dr. Saumya Sharma

The paper presented was under the title **"Evaluating the Compliance of Ventilator-Associated Pneumonia Care Bundle in the ICU of a Tertiary Care Teaching Hospital"**.

VAP is the pneumonia that arrives after the ventilator. Hospitals already have a "care bundle" – a short list of steps that cut that risk if the team actually does them. Reetika's work asked the unglamorous question: in our ICU, do we?

That is quality research with a bedside face. A checklist that only saves a lung when compliance is real.

Research Matchmaking

Institutional Research Core Team, 2026-2028

Santosh Deemed to be University is building a small engine: 8-10 faculty, mid and junior ranks with senior cover, for a period of 18-24 months, mentored by the University’s visiting research consultant – a clinician-scientist trained at the University of London and part of a core group at an Institute of National Importance.

Sr. No.	Name of the Faculty	Designation	Area of Expertise
1	Dr. Shuvojit Moulik	Head of Department, Biomedical Research	Cell biology and transdisciplinary research
2	Dr. Sayantani Karmakar	Assistant Professor, Biomedical Research	Cancer and targetted therapy
3	Dr. Sanchaita Misra	Assistant Professor, Biomedical Research	Clinical Immunology
4	Dr. Meena Jain	Head of Department, Public Health Dentistry	Tobacco control, Oral health risk behavior
5	Dr. Gunjan Uttam	Assistant Professor, Biomedical Research	Bioinformatics and Computational Biology
6	Dr. Mridul Sharma	Lecturer, Conservative Dentistry & Endodontics	Conservative Dentistry and Endodontics
7	Dr. Kriti Agarwal	Reader, Periodontics	Periodontology and Implantology
8	Dr. Abhishek Pandeya	Assistant Professor, Biomedical Research	Stem cell biology



Institutional Research Core Team, 2026-2028



Care to join us?

The brief is blunt. Learn the hard crafts until the campus can do them without calling a consultant every week: methods, biostatistics, complex trial design, high-value grant writing.

What you give: time, peer review, the full curriculum – not a guest appearance.

This initiative is capacity building with a job description – not a seminar with sandwich.

Honours & Laurels

Two certificates. One bench. Stem cells, RNA, and a decade that did not sit still.

Dr. Abhishek Pandeya,
Assistant Professor, DBMR, SDU

A Proud Moment for Santosh!

Dr. Pandeya has treated biomedical research as service: building cellular platforms that can actually asks how a neuron dies – and whether a stem-cell secretome or an engineered exosome can answer back.



Atal Vihari Vajpayee Seva Ratna Samman 2026



Dr. A.P.J Abdul Kalam National Academician Award 2026

Dr. Pandeya achieved Atal Vihari Vajpayee Seva Ratna Samman 2026 for his outstanding contribution in research, teaching, training in flow cytometry and stem cell therapeutics. Dr. A.P.J Abdul Kalam National Academician Award 2026 was for his enormous contribution in education-RNA biology, stem-cell science, neurodegeneration. Journals on the list include International Journal of Molecular Sciences, PLoS One, International Review of Immunology, Molecular and Cellular Biochemistry, Molecular Neurobiology. The science underneath: neuronal injury, proteinopathy, apoptosis, oxidative stress, and whether the stem-cell secretome can be more than a hopeful sentence.

One faculty member. Two foundations. Ten years of cells that refuse to be simple.