

# 3rd Conference of The Union South–East Asia Region (SEAR)

26th and 27th of May, 2016

Venue: Hotel Yak and Yeti

Kathmandu, Nepal



Hosted by:  
Nepal Anti Tuberculosis Association (NATA)

Kalimati, Kathmandu, Nepal

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*The Prime Minister*

KATHMANDU  
NEPAL



### Message

It is a matter of great pleasure to learn that Nepal Anti-Tuberculosis Association (NATA) is hosting the 3<sup>rd</sup> Conference of the Union South –East Asia Region in Nepal from 26-27, May 2016.

The pandemic of Tuberculosis (TB) still remains one of the major problems and challenges to public health in globe. South East Asia Region is one of the most vulnerable regions. Poverty, illiteracy, negative social stigma towards this disease, inadequate medical facilities and hazardous working conditions which are still common in our region, intensify the spread of TB as well as other lung diseases. Keeping this fact in mind, the government of Nepal has always given top priority to Tuberculosis Control Programme. We can't remain thanking the international health related organizations that have been playing a great role for controlling TB.

The supportive role of Nepal Anti –Tuberculosis Association (NATA) for controlling, diagnosing and curing Tuberculosis has been praiseworthy right from the time it came to existence more than six decades ago. The free health service rendered by NATA through its 37 district branches and the head office at Kalimati is of high quality and stands NATA as one of the major partners of the government of Nepal in controlling TB.

Hosting an international conference of this level is, no doubt, a matter of pride and prestige for NATA as well as for the Government of Nepal. As the conference is being participated in by distinguished medical experts, researchers and the volunteers in this sector, I strongly believe that this conference will greatly contribute to formulate new and more effective strategies, come up with significant recommendations and plans so that South East Asia Region as well as the whole world can combat the TB in better way in the days to come.

I wish the Conference a grand success.

15 May, 2016

K.P. Sharma Oli



**Hon. Ramjanam Chaudhari**  
Minister  
Ministry of Health

Government of Nepal



Private Secretariat  
Ramshahpath, Kathmandu  
Nepal

Ref. No.

Date: 05/16/2016



### Message

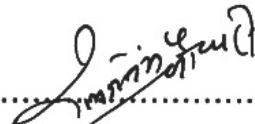
I am pleased to know that Nepal Anti-Tuberculosis Association (NATA) is hosting the Conference of the Union South-East Asia Region (SEAR) from 26<sup>th</sup> to 27<sup>th</sup> of May 2016.

Tuberculosis (TB) has been a notorious enemy to our life and humanity. Mycobacterium tuberculosis is the tiny organism, such tiny that even cannot be seen by our naked eyes, this bacteria has caused huge suffering to mankind. From the time, when TB patient was left in sanatorium to present age where anti TB drugs can be taken by the patient at his bed, several effective drugs and treatment strategies have been developed. Besides all these praiseworthy efforts we have made, TB still remains one of the major challenges to public health round the world. Due to our common social , economic, health and education related problems South East Asia Region has been a fertile region for TB. Ministry of Health , Government of Nepal is conscious of this truth so it has always laid high priority to eliminating TB once and forever.

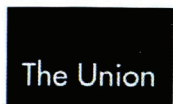
Nepal Anti-Tuberculosis Association (NATA) has been one of the co-fighters in our combat against Tuberculosis. My sincere thanks are due to NATA and the different organizations and individuals who have been joining their hands with the Ministry of Health in its attempts to preventing, controlling, diagnosing and curing TB.

I hope that the third conference of the union being hosted in Nepal will greatly help in formulating future policies and strategies for controlling TB with valuable recommendations.

Personally and on behalf of Ministry of Health, I wish grand success of the conference .

  
.....  
Ramjanam Chaudhary





**International Union Against  
Tuberculosis and Lung Disease**  
*Health solutions for the poor*

*Union Internationale  
Contre la Tuberculose  
et les Maladies Respiratoires*

*Unión Internacional  
Contra la Tuberculosis y  
Enfermedades Respiratorias*



Dear Colleagues,

Thank you for participating in 3rd Conference of The Union South-East Asia Region (SEAR).

As you know, we are now in the first year of a new era of global development defined by the Sustainable Development Goals and other new agendas, such as the WHO End TB Strategy and the Global Plan to End TB: 2016-2020. If we are to succeed in achieving the global goals and objectives defined in these landmark documents, we must accelerate progress against TB and lung disease in the countries within the South-East Asia Region.

South-East Asia is now at a critical moment as a region: economic development has improved living standards. But with this progress has come rising rates of noncommunicable diseases such as diabetes, alarming trends in tobacco consumption, and a growing, urban population. All of this points to a higher burden of TB and lung disease—unless we act.

Your work, your commitment, is essential to reversing these trends. I am confident that we will succeed.

As we approach the Centennial anniversary of The Union and our future beyond, I am extremely grateful for your partnership. You have helped to make The Union a vital organization in global public health—one that is leading the fight against TB and lung disease regionally and around the world.

I wish you the best of success and a rewarding conference experience.

José Luis Castro  
Executive Director









Government of Nepal  
Ministry of Health & Population  
Department of Health Services

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## National Tuberculosis Centre

Thimi, Bhaktapur, Nepal.

(....., Section)

Ref. No.:



### Message

It is a matter of great pleasure and pride that Nepal Anti Tuberculosis Association, a great co-worker and social partner of NTC, is hosting the 3<sup>rd</sup> conference of The Union South-East Asia Region (SEAR). It is going to be a wonderful forum for the TB community in our region in the wake of the bitter truth that tuberculosis still remains a burning challenge to human health and humanity itself.

I am really hopeful that the 3<sup>rd</sup> conference is going to provide a great opportunity to medical personalities, researchers and the social activists fighting against TB in South –East Asia Region in particular and to the whole world in general. The sharing of new ideas and strategies to combat TB, that is sure to take place in the conference, will certainly give us all insights into what we should be doing in the days ahead so that our incessant fight against TB turns out to be more effective and fruitful to all the people in this region as well as the whole world. The recommendations made by health experts and distinguished delegates participating in the conference will have enormous positive impact in our fight against TB as well as other lung diseases.

New and more effective drugs are being developed and clinical studies are being conceived. Only a few days back WHO has announced new recommendations for a nine month shortened treatment regimen for MDR-TB patients. The conference will definitely share these and many more current practices and strategies in preventing, diagnosing and curing TB and other lung diseases.

With great hopes for getting enlightened with idea sharing, I wish for the grand success of the 3<sup>rd</sup> conference of The Union South-East Asia Region.

Dr. Bikash Lamichhane

Director

NTC



## Message from the Chair

Dear Colleagues,

I am immensely pleased to bring to your kind notice that **the 3<sup>rd</sup> Conference of The Union South-East Asia Region (SEAR)** has concluded very successfully. Had it not been the inspirations, guidance, help and encouragements from you all, the 3<sup>rd</sup> conference held on 26<sup>th</sup> and 27<sup>th</sup> of May this year, would have been out of the question. I'd like to extend my sincere thanks to all those contributing directly or indirectly to the conference. My special thanks are due to The Union Headquarter, Paris; the Pittsfield Anti Tuberculosis Association, Western Massachusetts; Kuratorium Tuberkulose in der welt e.V., Germany and Japan Anti TB Association (JATA) Japan for their encouragement and help we got to conduct the conference. We can't remain thanking the government of Nepal, Ministry of Health, Dept. of Health, NTC and SAARC TB and HIV/AIDS Centre for their support in conducting the conference. Our partner organizations in Nepal and round the world too deserve our sincere gratitude for their invaluable contributions to make the conference a success.



South-East Asia Region has been the most vulnerable region once it comes to TB and other lung diseases. The main causes behind this bitter truth are illiteracy, poverty and social stigma that prevail in this region. The scenario calls for sincere and committed efforts of all the TB community and individuals involved in the combat against tuberculosis. To the best of my knowledge, most of the abstracts and research papers as well as symposia and workshops presented in the conference dealt with present condition of TB and the ways to follow forward in the days ahead. As the outcome of the two day conference and the scientific programmes in it, we have got the **17 point Kathmandu Declaration**. The declaration mainly focuses on every **individual's right to be protected against TB and have access to supportive measures to cure his/her disease**. This very focus incorporates all the points to be adopted as stated by the Kathmandu declaration.

I hope the Kathmandu declaration remains a guiding principle as well as a strategic plan for all the doctors, health experts, health policy makers, government and non-government organizations working in the field of TB and Lung diseases, the social workers and the whole TB community in this region and round the globe.

Our success is guaranteed if we make further joint and consolidated efforts. So let's join hands and move ahead unitedly against our common enemy, Tuberculosis.

A handwritten signature in black ink, appearing to read 'Devendra', with a long horizontal stroke extending to the right.

Devendra Bahadur Pradhan  
President  
Nepal Anti TB Association (NATA)  
And

President  
The organizing Committee,  
The 3<sup>rd</sup> conference of The Union  
South East Asia Region (SEAR)



## **The Executive Committee Meeting**

### **3<sup>rd</sup> conference of The Union SEAR-2016**

The executive committee meeting of The Union South-East Asia Region (SEAR) was held in Hotel Yak and Yeti in Kathmandu on 25<sup>th</sup> of May 2016. Since India, Nepal, Bangladesh, Myanmar, Pakistan and Sri Lanka are the constituent member countries of the South –East Asia Region the committee has six executive members including the chair.

The meeting of the executive committee was called at 16:30 by the President of SEAR Mr. Devendra Bahadur Pradhan who welcomed the executive committee members to the meeting. The main agenda of the meeting were:

- a. the brief reports of the 3<sup>rd</sup>Conference of The Unio(SEAR) and its preparation
- b. Next conference (4<sup>th</sup>conference) of The Union (SEAR)
- c. others.



#### **Present in the meeting were:**

Mr. Devendra Bahadur Pradhan , President (Nepal),

Mr. Chaudhary Muhammad Nawaz (Pakistan),

Dr. Win Maung (Myanmar),

Mr. Mukul Khairuddin Ahmed (Bangladesh),

Prof. Dr. Vijay Kumar Arora (India) and

Mr. Madan Kaji Shrestha , General Secretary of NATA (Nepal)

Mr. W.D. Ailapperuma from Sri Lanka has sent his apology for his inability to be present in the meeting, yet the quorum of the meeting was fulfilled with the present members.

Mr. Muhammad Ahmad Bani from PATA was also present in the meeting as an invitee.

#### **Discussions and decisions made:**

- As per the fixed agenda, the president welcomed all the delegates in the meeting and introduced each of them to the body present there.
- The present delegates were presented with the brief report on the preparation and programmes of the two day conference to be held on the following consecutive days 26<sup>th</sup> and 27<sup>th</sup> of May.
- As Mr. Chaudhary Muhammad Nawaz (Pakistan), proposed the 4<sup>th</sup> conference of the Union SEAR be held in Pakistan in 2018, the meeting discussed and agreed with the proposal. In due

course the meeting also had consultations about the 5<sup>th</sup> Conference of The Union (SEAR) and came to a conclusion that the 5<sup>th</sup> Conference be held in India in 2020.

➤ The executive committee meeting also discussed about the formation of the following committee and agreed that the portfolios be given in the following ways.

- Pakistan Anti Tuberculosis Association (PATA)- President (Pakistan)
- Nepal Anti Tuberculosis Association (NATA)- Immediate Past President (Nepal)
- Tuberculosis Association of India (TAI) – Vice-President ( India)
- National Anti Tuberculosis Association of Bangladesh (NATAB) – Rapporteur ( Bangladesh)
- Treasure (To be appointed by the president of SEAR ( Pakistan )
- The meeting was adjourned at 17:30 with the note of gratitude expressed by the president.

### **The Inaugural programme ,3<sup>rd</sup> Conference of The Union South-East Asia Region**

The 3<sup>rd</sup> conference of The Union SEAR was held in Kathmandu on 26<sup>th</sup> and 27<sup>th</sup> of May 2016. The venue of the conference was one of the five star hotels in Kathmandu, Hotel Yak & Yeti. Since the two day conference had busy schedule, the normal sessions were started right from 9:0 am whereas the formal inaugural function commenced at 12:30 noon.

Rt. Hon. Mr. Nanda Bahadur Pun, Pasang , the vice-president of Nepal was the chief guest in the inaugural session. The other dignitaries to be on the platform were Dr. Xiaolin Wei, the general secretary of The Union , Ms. Kamal Rana , founder member and immediate past president of NATA, Mr. Santa Bahadur Shrestha, the Secretary of Ministry of Health , Nepal and Dr. Nihal Singh The WHO Nepal office representative.

The inaugural programme was presided over by Mr. Devendra Bahadur , Chairman of Nepal Anti TB Association And President of The organizing Committee, The 3<sup>rd</sup> conference of The Union South East Asia Region (SEAR ) who also welcomed the chief guest, special guest, dignitaries and the delegates present in the inaugural function. Wishing for the historic success of the conference Mr. Pradhan stressed the need for joint efforts to combat TB in the years to come. He also opined that the governments in this region should

Have more trust on and should facilitate nongovernmental and voluntary organizations like NATA if the menace of TB had to be overcome.

Through his welcome speech he wished for the wonderful stay and conference to all the delegates from round the world. The guests on the dais were felicitated by being presented with a batch and the Khada. According to the Nepali tradition, Chief Guest, he vice president inaugurated the programme by lighting the ‘panas’ the artistic





lamp.

In course of expressing remarks of best wishes to the conference, Dr. Nihal Sing Medical officer and WHO representative said that TB has been a major health challenge in this region and that the 3<sup>rd</sup> conference will bring new hopes and strategies for all those associated with prevention and control of this epidemic. Dr. Sing wished a great success to the conference with this remarks of best wishes.

Expressing his best wishes for the success of the conference, Dr. Xiaolin Wei, the secretary general of The Union said that The Union has been putting its great efforts to minimize the epidemic of



Tuberculosis from round the world and said that the south East Asia Region particularly has to be given special attention. Describing the conference as a wonderful forum for discussion and making recommendations Dr. Xiaolin wished for the grand success of the ongoing conference and hoped that the recommendations and declarations made at Kathmandu will prove mile stones towards prevention, cure and diagnosis of TB not only in South East Asia Region but also round the globe.

In her remarks of best wishes the founder member and immediate past president of NATA, Ms. Kamal Rana talked about the beginning of the organization and the changes that have taken place since then. She hoped that the conference would prove very instrumental in bringing about new strategies for treating and preventing Tuberculosis. She also thanked her colleagues at NATA for their sincere efforts to bring about the conference to this height.

The special guest in the inaugural programme, Mr. Shanta Bahadur, Health Secretary lauded the efforts made by NATA in organizing the conference. He added that NATA has been a great partner in implementing the National Tuberculosis Programme of the government of Nepal. Wishing for a great success of the conference Mr. Shrestha said that the partnership of the government, Ministry of Health will continue growing and strengthening in the days ahead with NGO's like Nepal Anti Tuberculosis Association as the single efforts made by the government are not sufficient to combat the disease.

Delivering his best wishes for the success of the conference the chief guest welcomed the entire delegate to Nepal, the Land of Everest, the birth place of Lord Buddha and the home to self-reliant Nepalese people. He opined that TB still remains a serious threat to human health round the globe and particularly South East Asia Region is much more vulnerable to it. He stressed that it should be taken as a serious and eminent challenge and solutions be sought out immediately so that people in this region can have their right to live secured.

Expressing his view that the efforts made so far need to be further accelerated to achieve better results, he thanked the health workers, social activists and all those involved in the combat against TB for their efforts. Expressing the pathetic data that 5000 innocent Nepalese are killed every year by TB, vice-president lauded the efforts made by NATA right from its very establishment more than six decades back. The vice president stressed the need of prevention with the popular saying “Prevention is better than cure” and said that the MDR TB was now coming up as a more serious challenge to all involved in the field of preventing and curing TB.

He stressed the need of joint efforts nationally, regionally and globally so that victory could be achieved over TB. Finally he wished for the grand success of the conference and hoped that this conference will come up with recommendations that will prove really useful in preventing, curing and diagnosing TB.

Mr. Madan Kaji Shrestha, the General Secretary of NATA expressed vote of thanks to the guests, dignitaries and the delegates from the side of the organizer. With his vote of thanks Mr. Shrestha clarified that NATA has been joining hands with the Government of Nepal right from its establishment to make Nepal TB free and assured that the joint efforts will be continued in the future. He appreciated the General Secretary of The Union for his continuous support to fight against Tuberculosis in the SEA region. He hoped that the 3<sup>rd</sup> conference of The Union would be a sign post for all the people involved in the combat against tuberculosis.



### **The Scientific Sessions, 3<sup>rd</sup> Conference of the Union SEAR-2016**

The two-day 3<sup>rd</sup> conference of The Union South-East Asia Region (SEAR) held on 26<sup>th</sup> and 27<sup>th</sup> of May, 2016 in Kathmandu proved to be a great forum for medical experts, doctors, researchers, social workers, health policy makers and pharmaceuticals involved in TB and other lung disease fields. Besides, it showed up a remarkable number of participants representing different government and non-governmental organizations from the sector in the SEA region as well as round the globe.

The theme of the 3<sup>rd</sup> conference was TB and Lung Health which represented overall aspects of different diseases and their curative and preventive measures. The speech delivered by Dr. Xiaolin Wei, as the secretary general of The Union, Paris regarding the attempts made by The Union and its different regions was the first attraction of the conference.





Both the days had really busy schedules and only allotted time could be spared by the delegates and participants.

### **A. Plenary:**

The first Plenary Session on 26<sup>th</sup> of May was conducted in the main hall, the Durbar Hall. It commenced at 9:45 am sharp and went on for an hour. It was on End TB Strategy and SEAR TB Epidemiology. The Key speaker of the Plenary –I , was Dr. Mohammad Akhtar, who represented WHO. Two different topics namely The END TB STRATEGY and GLOBAL TB SITUATION, PROGRESS AND MOVING FORWARD TO END TB were discussed in the plenary session.

The second Plenary started at 4:00 and continued till 5:30 pm. It was presented by STOP TB partner. The plenary focused on Improving Access For Quality-Assured TB Medicines and Diagnostics: Global Drug Facility, Strategic Objects, Product Portfolio and Orders Process Mapping Improving Access For Quality-Assured TB Medicines and Diagnostics: Global Drug Facility, Strategic Objects, Product Portfolio and Orders Process Mapping. The key speaker was Dr. Alessio Mola.

The third Plenary that got underway on 27<sup>th</sup> May at 9:00 and continued till 10:00 was presented by Jonson and Jonson. It was on Bedaquiline and New TB drugs. Dr. Chrispin Kambili was the key speaker of the plenary.

### **B. Symposia:**

As the first Plenary on 26<sup>th</sup> was over, the first Symposium on “DR TB Management in Nepal: experiences and lessons learned” got underway. The symposium was chaired by Dr. Pushpa Malla Former Director, NTC and its co-chair was Dr. Buddha Basnyat from Patan Hospital. The symposium focused mainly on: National overview of DR TB management in NTP: from NTP Nepal ,Management of DR TB – a case study from NATA/GENETUP Nepal, Patient Centered care in DR TB management: a model on psychological support to DR TB cases and experience of DR TB hostel in Nepal: from HERD and should partnership be forged and delivered in decentralized management of DR TB care: engagement of non-state actors from HERD .The symposium started at 10:45 and concluded at 12:15 just before the inaugural function was due to take place and the chief guest of the same, the Vice-president of Nepal was in the doorway of the venue.



The second symposium on 26<sup>th</sup> May was on “Tobacco Cessation into Regular TB Services from TB Patients in Low Income Countries” began after lunch at 2:15 and continued till 3:45. It basically

focused on Genetic Diversity and Transmission Dynamics of MDR TB in Nepal, Omni gene Sputum Reagent- a Novel Technique for Optimizing Diagnosis of M.Tuberculosis and Referral Aided with Sputum Collection and Taransport Increases proportion of Referrals reaching Microscopy centers for Sputum testing. Dr.Sharat C. Verma, Director, STAC and Dr. JamhoihTonsing, Regional Director, The UNION SEAR were the chairs of the symposium.

The 3<sup>rd</sup> symposium was conducted on 27<sup>th</sup> May from 2:15 to 3:45 pm. It was on Tobacco Control in SAARC Countries, where are we for achieving WHO FCTC Recommendation. The topics discussed were: FCTC & MPOWER Bangladesh Progress by Dr.Akramul Islam, TOBACCO CONTROL IN NEPAL: Act locally and Lead globally by Ananda Bdr Chand,Tobacco Control in SAARC- The status of FCTC/MPOWER and recommendations to SAARC secretariat and Tobacco Epidemic and Best Practices Control Policies-India by Dr. Rana J Singh.The Chairs for this symposium were: Mr. Khimananda Bhusal, Under Secretary MOH, Nepal and Dr. Sharat Chandra Verma, Director, STAC.

### C. Workshop:

There was only one workshop in the 3<sup>rd</sup> conference. The workshop was presented by the EAG group of the Union. The facilitators were Dr. Karuna Shangeli and Dr. Apurba Narain. The workshop continued for around 3-1/2 hrs towards the end of day two and was on “The Ethics of Health Research”. There were around 30 participants and most of them were medical students and persons related to health researches.

### D. Paper presentations:

There were oral presentations as well as poster presentations. The poster presentation of 4 posters was on the second day of the conference where as the VIII sessions of oral presentations on different topics and sub-topics were conducted on both the days. Some of the symposium continued side by side along with the paper presentation on the first day.

**The first session** was on TB Bacteriology and Immunology . It included three different sub-topics :

1. Genetic Diversity and Transmission Dynamics of MDR TB in Nepal.
2. Omnigene Sputum Reagent- A Novel Technique for Optimizing Diagnosis of M. Tuberculosis .
3. Referral Aided with Sputum Collection and Taransport Increases proportion of Referrals reaching Microscopy centers for Sputum testing.

Prof. Dr. Basista Rijal from TUTH and Mr. Dhurba Khadka, Microbiologist, NTC were chair and co-chair respectively.



**The second session** was on Adult & Child Health/Tobacco.

It included the sub-topic:

Developing and implementing a smoking cessation intervention within the PAL programme in Nepal.

Shanta Lal Mulmi, National Pressure Group Against TB was the chair of the second session and Dr. Ajith P. Weerakoon STAC was the co-chair.



**The third session** was on Nurses and Allied Professionals Papers. It included five different sub-topics

1. Tuberculosis Related Stigma among General Population and Key Stakeholders within a Community across 30 districts in India.
2. Factors that Constrains General Practitioners in Sri Lanka in Participating in TB preventive program.
3. Mobilizing Community Health Volunteers can contribute for Early Case Finding in Kathmandu Valley, Nepal.
4. Tuberculosis in Staff/Students in Patan Hospital.
5. WHAT ROLE PHARMACISTS (Medical shops) AND RURAL HEALTH CARE PROVIDER (RHCPs) CAN PLAY IN TB CARE AND CONTROL?

Dr. Kulesh Thapa from BNMT was the chair and Dr. Komal Kiran Pradhan from was the co-chair of the session

NATA

**The fourth session** of paper presentation was on Public Private Mix. It included two sub-topics:

1. Community Stakeholders and Early Case Detection- Experiences from Divine Project, New Delhi
2. Role of DOTS Corner in Medical Institutes- BRAC Experience

The fourth paper presentation was chaired by Dr. Sushil C. Baral from HERD and its co-chair was Dr. D.K Yadav from BPKIHS

**The fifth session** was on TB Bacteriology and Immunology. It included five sub-topics:

1. GeneXpert for TB lymphadenitis.
2. Use of Xpert MTB/RIF in Mobile Van for Detection of Tuberculosis among people Living with HIV in Achham, Nepal.
3. Yield of intensified tuberculosis case finding activities using Xpert MTB/RIF among risk groups in Nepal
4. Advantage of Gene Xpert MTB/RIF for Pulmonary TB Suspects in Nepal.
5. Gene-xpert Diagnosis of MDR TB with Gastric Lavage Aspirate

The fifth paper presentation session was chaired



by Prof. Dr. Jeevan Sherchan from TUTH and its co-chair was Mr. Bhagwan Maharjan NATA

**The sixth session** under the topic Civil Society and Responsibility in TB Care and Support included two different papers:

1. Way forward to TB elimination: Spotting TB in community through engagement of non-formal health care providers.
2. Assessment of treatment outcome of TB patients treated under direct observation of Rural Health Providers: A Pilot Study.

The sixth session was chaired by Dr. Md.Akramul Islam and its co-chair was Ram Sharan Gopali from JANTRA.

**The seventh session** of paper presentation was on Research and Development/ Natural Disaster and TB and included three papers:

1. Experience from Research projects on multi-drug resistant tuberculosis (MDR-TB) in Bangladesh.
2. Early Detection of Tuberculosis Cases among Internally Displaced People in Earth Quake Affected Districts of Nepal.
3. Early response to address TB management during disaster, a key components in disaster settings.

Dr. Mohammad Akhtar from WHO was the chair and Dr. Bhawana Shrestha, Genetup Head, NATA was the co-chair.

**The Eighth session** was on Tuberculosis. It included three different papers:

1. Active case finding of tuberculosis among smokers with high risk factors in a poor province of China.
2. Development and Implementation of Supervision and Patient Support Approach in Multi drug resistant TB management programme in Nepal.
3. Trial of empirical Anti-TB Treatment in Neck Nodes; is it justified?

The eighth session was chaired by Dr. Sharat C. Verma Director, STAC and its co-chair was Dr. Pramod Bhattari NTC

**The Poster presentation session** was on the second day of the session and was presented in the Durbar Hall during 4:00 to 5:30 pm. There were four posters on:

1. Workplace TB Screening at Rice Mill Identified undiagnosed TB.
2. Diagnostic Yield of Consecutive Three Sputum samples from Smear Microscopy and Sputum Culture for PTB.
3. Factors Associated with MDR TB: A case control study from Kailali district from Far West Nepal.
4. Are MDR TB patients missed due to Incomplete





History?

The chair of the poster presentation session was Dr. Bhabana Shrestha and its co-chair was Dr. Ashish Shrestha.

### **The closing ceremony, 3<sup>rd</sup> Conference of The Union(SEAR)-2016**

The closing ceremony of the 3<sup>rd</sup> conference of The Union (SEAR) commenced at 17:30 on 27<sup>th</sup> of May in the Durbar Hall of Hotel Yak and Yeti. Mr. Devendra Bahadur Pradhan , the president of NATA presided over the closing ceremony participated in by nearly 200 people. Most dignitaries, delegates



guests and other participant present in the inaugural function were present for the closing ceremony. Mr. Shanta Bahadur Shrestha, the Secretary, Ministry of Health was the chief guest of the closing ceremony. Other guests on the dais were Dr. Xiaolin Wei, the Secretary General of The Union , Dr. Sharat Chandra Verma, Director , SAARC TB and HIV AIDS Centre and Dr. Bhawana the chief of GENETUP and the member secretary of the scientific committee of the 3<sup>rd</sup> Conference of The Union.

In the beginning of the closing ceremony Dr. Bhawana, the member secretary of the scientific committee presented the 17 point Kathmandu declaration. The declaration mainly focuses on the **people's right to be protected against Tuberculosis and to have access to adequate support measures to cure their disease.**

In his closing remarks Dr. Verma , the director of SAARC TB and HIV AIDS Centre, expressed his happiness that the conference had been successfully concluded and that the two day conference had been really very important as the ideas of different medical experts, doctors and researchers were shared during the conference and that they were all reflected in the Kathmandu declaration. He opined that organizing a conference of this height was a matter of privilege and pride for the organizers as well as for Nepal.

Expressing his closing remarks, Dr. Xiaolin Wei, the Secretary General of The Union opined that the conference has been remarkable to him as well as to all the people associated with prevention, diagnosis and cure of Tuberculosis and other lung diseases. Praising the total management of the conference Dr. Wei said that it was impressive and perfectly managed. He lauded the declarations made and emphasized that the declarations are followed by every one involved in this field and that the essence of the Kathmandu declaration be reflected in every activity we go ahead with regarding tuberculosis and other lung diseases. Thanking the organizers for making the conference historic Dr.

Wei hoped that the 3<sup>rd</sup> conference proves a sign post for SEA region as well as other regions of The Union.



In the closing ceremony different organizations, guests, volunteers and rapporters were presented with letters of Appreciation and token of love and certificates. The recipients of Letter of Appreciation presented by the chief guest were: Kuratorium Tuberculosis in der welt e.V. Germany, Japan Anti Tuberculosis Association, The Pittsfield Anti Tuberculosis Association, Western Massachusetts, The Secretary General of The Union Dr. Xiaolin Wei, Dr. Chrispin Kambili, Janssen, Johnson & Johnson Pvt. Ltd., Dr.

Muhammad AKHATAR, representative of WHO and Dr. Bhawana Sehresth, Member Secretary of Scientific Committee and the chief GENETUP.

The rapporters of the different scientific sessions and the volunteers as well as the event manager were presented the Token of Love bearing the logo of The Union over the background of Mt. Everest and the certificates. The rapporters were presented the token of love and certificate by Mr. Anil Thapa, Acting Director of NTC. Dr. Xiaolin Wei, the Secretary General of The Union gave away the token of love and certificates to some of the volunteers and Dr. Sharat Chandra Verma, the director of SAARC TB and HIV AIDS Centre distributed the token of love and certificates to other volunteers.

In his closing remarks, the chief guest Mr. Shanta Bahadur Shrestha expressed his pleasure to be there as the chief guest and hoped that the 3<sup>rd</sup> conference would give new thoughts and new dimensions to all those involved in the combat against TB. He said further sincere efforts from the governments and public sector and more effective TB strategies were essential if the SEA region has to be brought up in the health care sector especially regarding TB and other Lung diseases. He also emphasized that the precious outcome of the two-day conference, the Kathmandu declaration is taken as the guiding principle by all involved in the preventive, diagnostic and curative activities against TB.

Mr. Bed Prasad Kaju, the vice-president of NATA honoured the chief Guest Mr. Shanta Bahadur Shrestha with a token of love in the closing ceremony. Before presenting his concluding remarks and declaring the end to the closing programme of the conference Mr. Devendra Bahadur Pradhan, the President presented the token of love to the members of Coordination Committee of South East Asia Region from Pakistan, India, Bangladesh, Myanmar and Sri Lanka. Delivering his concluding remark Mr. Pradhan thanked all dignitaries, guests, delegates as well as all the individuals and organizations helping directly or indirectly to make the conference a success. Referring to the 17 point Kathmandu declaration, Mr. Pradhan said that the declaration, the essence of the discussions and idea sharing, was the outcome of the historic conference. He hoped that the points declared are followed

perfectly and scrupulously. He was of opinion that all the people and organizations involved in the fight against Tuberculosis should be fully committed to implementing and following the declarations as the guiding principles in their quarter. He said that poverty, illiteracy and social stigma present in the South-East Asia Region were the biggest impediments to addressing issues related to prevention and cure of tuberculosis. Hoping the conference to prove a mile stone related to TB curing, diagnosis and prevention, Mr. Pradhan, declared the conclusion to the two-day conference.

A special banquet/ dinner party representing true Nepali culture and even blended with Nepali delicacies and cultural shows was organized in honour of the guests and delegates. The dinner party was organized in Yak Palace an A class party palace situated in the historic city of Patan nearly 5 miles away from the conference venue , Hotel Yak and Yeti.

## Scientific Programme Briefs

### A(Tuberculosis)

Date: 27th May (11:45-13:15)

S.N	Abstracts Under	Country	Email	Nam	Organizati on
1	Active case finding of tuberculosis among smokers with high risk factors in a poor province of China	China	<a href="mailto:Xiaolin.wei@utoronto.ca">Xiaolin.wei@utoronto.ca</a>	Dr. Xiaolin Wei	UNION
2	Development and Implementation of Supervision and Patient Support Approach in Multi drug resistant TB management programme in Nepal	Nepal	Sudeepa.Khanal@herd.org.np	Sudeepa Khanal	HERD
3	TRIAL OF EMPIRICAL ANTI TUBERCULOSIS TREATMENT IN NECK NODES; IS IT JUSTIFIED?	Nepal	<a href="mailto:Madanpiya@gmail.com">Madanpiya@gmail.com</a>	Dr. Madan K Piya	Personnel (pvt. Health facility)

### B(TB Bacteriology and Immunology)

S.N	Abstracts Under	Country	Email	Name	
	<b>B2</b> Date: 26th May(14:15-15:45)				
1	Genetic Diversity and Transmission Dynamics of MDR TB in Nepal	Nepal	Bhagawan.maharjan@yahoo.com	Bhagawan Maharjan	GENETUP
2	Omnigene Sputum Reagent- A Novel Technique For Optimizing Diagnosis of M.Tuberculosis	Nepal	Bijendra.raya@gmail.com	Bijendra Raya	GENETUP
3	Referral Aided with Sputum Collection and Taransport Increases proportion of Referrals reaching Microscopy centers for Sputum testing	India	ATrivedi@theunion.org	Dr. Archana Trivedi	RNTCP

**B1** Date:27th May (10:00-11:30)

4	GeneXpert for TB lymphadenitis	Nepal	Manankarki@hotmail.com	Dr. Manan Karki	Patan Hospital
5	Use of Xpert MTB/RIF in Mobile Van for Detection of Tuberculosis among people Living with HIV in Achham, Nepal	Nepal		Prabin Shrestha	HERD
6	Yield of intensified tuberculosis case finding activities using Xpert MTB/RIF among risk groups in Nepal	Nepal		Prabin Shrestha	HERD
7	Advantage of Gene Xpert MTB/RIF For Pulmonary TB Suspects In Nepal	Nepal	Kgautam@iom.int.nepal	Gautam Kanchan	IOM
8	Gene-xpert Diagnosis of MDR TB with Gastric Lavage Aspirate	Nepal	Sunildrp@gmail.com	Dr.Sunil Pokhrel	Patan Hospital



**C(Nurses and Allied Professionals)**

Date: 26 th (16:00-17:30)

S.N	Abstracts Under	Country	Email	Name	
1	Tuberculosis Related Stigma among General Population and Key Stakeholders within a Community across 30 districts in India	India	ksagili@theunion.org	Karuna D Sagili	
2	Factors that Constrains General Practioners in Srilanka in Participating in TB preventive program	Nepal	saarctb@mos.com.np	Dr. Ajith P. Werakoon	STAC
3	Mobilizing Community Health Volunteers can contribute for Early Case Finding in Kathmandu Valley, Nepal	Nepal	Gwala73@hotmail.com	Ram Sharan Gopali	JANTRA
4	TUBERCULOSIS IN STAFF/STUDENTS AT PATAN HOSPITAL	Nepal	mila.shakya@gmail.com	Dr. Mila Shakya	Patan Hospital
5	Community Outreach	India	Vikass@tbalertindia.org	Vikash Panibatla	

Date: 26th May (14:15-15:45)

S.N	Abstracts Under	Country	Email	Name	
1	Developing and implementing a smoking cessation intervention within the PAL programme in Nepal	Nepal	sudeepa.Khanal@herd.org.np	Sudeepa Khanal	HERD

**G(Civil Society roles and responsibilities in TB care and Prevention)**

Date: 27th May( 10:00-11:30)

S.N	Abstracts Under	Country	Email	Name	
1	Way forward to TB elimination: Spotting TB in community through engagement of non-formal health care providers	India	ATrivedi@theunion.org	Dr. Archana Trivedi	RNTCP
2	Assessment of treatment outcome of TB patients treated under direct observation of Rural Health Providers: A Pilot Study	India	ATrivedi@theunion.org	DR. Archana Trivedi	RNTCP

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**H(Natural disaster and Lung Health)**

Date: 27th May (11:45- 13:15)

S. N	Abstracts Under	Country	Email	Name	
1	Early Detection of Tuberculosis Cases Among Internally Displaced People in Earth Quake Affected Districts of Nepal	Nepal	Gwala73@hotmail.com	Sudhir Rai	JANTRA
2	Early response to address TB management during disaster, a key components in disaster settings.	Nepal	NTC	Dr. Aashish Shrestha	NTC

**M(Public Private Mix)**

Date:26th May (16:00-17:30)

S. N	Abstracts Under	Country	Email	Name	
1	Community Stakeholders and Early Case Detection- Experiences from Divine Project, New Delhi	India	Vikass@tbalertindia.org	Vikash Panibatla	
2	ROLE OF DOTS CORNER IN MEDICAL INSTITUTES-BRAC EXPERIENCE	Bangladesh	fatema.kh@brac.net	Fatema Khatun	BRAC

**K(Research and development)**

Date: 27th May (11:45-13:15)

S. N	Abstracts Under	Country	Email	Name	
1	Experience from Research projects on multi-drugresistant tuberculosis (MDR-TB) in Bangladesh	Bangladesh	rifat_mahfuza@hotmail.com	DR. Rifat Mahfuza	BRAC

The 3rd Conference of the Union-South East Asian Region (SEAR) 26th-27th May, 2016							
Program Schedule							
26th May, 2016							
Time	Activities	Venue (Hotel Yak and Yeti)	Topics	Sub-Topic	Chair	Co-Chair	Key Speaker
8:00-9:00	Registration- Throughout the day	Atrium Hall					
9:00-9:30	Tea Time						
9:30-9:45	Speech for the Union- General Secretary	Durbar Hall					
9:45-10:45	Plenary I	Durbar Hall	End TB Strategy and SEAR TB Epidemiology	1. The END TB STRATEGY 2. GLOBAL TB SITUATION, PROGRESS AND MOVING FORWARD TO END TB			Dr. Mohammad Akhtar
10:45-12:15	Symposium I	Crystal Hall	DR TB Management in Nepal: experiences and lessons learned	1.National overview of DR TB management in NTP: NTP Nepal 2.Management of DR TB – a case study from NATA/GENETUP Nepal 3.Patient Centered care in DR TB management: a model on psychological support to DR TB cases and experience of DR TB hostel in Nepal: HERD 4.Should partnership be forged and delivered in decentralized management of DR TB care: engagement of non-state actors – HERD	Dr. Pushpa Malla Former Director, NTC	Dr. Buddha Basnyat Patan Hospital	
12:15-13:15	Inauguration	Durbar Hall					
13:15-14:15	Lunch	Regal 2					
14:15-15:45	Symposium II	Durbar Hall	Tobacco Cessation into Regular TB Services from TB Patients in Low Income Countries	1. Tobacco cessation intervention among TB patients-an experience from India. 2. Tobacco cessation through TB clinics for tuberculosis patients in Bangladesh. 3. Lessons learnt from The Union working group on tobacco cessation and smoke-free environment for tuberculosis patients.	1. Dr. Sharat C. Verma Director, STAC  2. Dr. Jamhoir Tensing, Regional Director, The UNION SEAR		

	Paper Presentation Session I	Crystal Hall	TB Bacteriology and Immunology .	1. Genetic Diversity and Transmission Dynamics of MDR TB in Nepal. 2. Omnigene Sputum Reagent- A Novel Technique For Optimizing Diagnosis of M.Tuberculosis. 3. Referral Aided with Sputum Collection and Transport Increases proportion of Referrals reaching Microscopy centers for Sputum testing.	Prof. Dr. Basista Rijal TUTH	Mr. Dhurba Khadka Microbiologist, NTC	
	Paper Presentation Session II	Regency Hall	Adult & Child Health/ Tobacco	1. Developing and implementing a smoking cessation intervention within the PAL programme in Nepal	Shanta Lal Mulmi National Pressure Group Against TB	Dr. Ajith P. Weerakoon STAC	
15:45-16:00	Tea Time						
16:00:17:30	Plenary II	Durbar Hall		Improving Access For Quality-Assured TB Medicines and Diagnostics: Global Drug Facility, Strategic Objectives, Product Portfolio and Orders Process Mapping			Dr. Alessio Mola
	Paper Presentation Session III	Regency Hall	Nurses and Allied Professionals Papers	1. Tuberculosis Related Stigma among General Population and Key Stakeholders within a Community across 30 districts in India. 2. Factors that Constrains General Practitioners in Sri Lanka in Participating in TB preventive program. 3. Mobilizing Community Health Volunteers can contribute for Early Case Finding in Kathmandu Valley, Nepal. 4. Tuberculosis in Staff/Students in Patan Hospital. 5. WHAT ROLE PHARMACISTS (Medical shops) AND RURAL HEALTH CARE PROVIDER (RHCPs) CAN PLAY IN TB CARE AND CONTROL?	Dr. Kulesh Thapa BNMT	Dr. Komal Kiran Pradhan NATA	
	Paper Presentation Session IV	Crystal Hall	Public Private Mix	1. Community Stakeholders and Early Case Detection- Experiences from Divine Project, New Delhi 2. Role of DOTS Corner in Medical Institutes- BRAC Experience	Dr. Sushil C. Baral HERD	Dr. D.K. Yadav BPKIHS	

**27th May, 2016**

Time	Activities	Venue (Hotel Yak and Yeti)	Topics		Chair	Co-Chair	Key Speaker
9:00-10:00	Plenary III	Durbar Hall	Bedaquiline and New TB drugs				Dr. Chrispin Kambili
10:00-11:30	Paper Presentation Session V	Durbar Hall	TB Bacteriology and Immunology .	<ol style="list-style-type: none"> <li>1. GeneXpert for TB lymphadenitis.</li> <li>2. Use of Xpert MTB/RIF in Mobile Van for Detection of Tuberculosis among people Living with HIV in Achham, Nepal.</li> <li>3. Yield of intensified tuberculosis case finding activities using Xpert MTB/RIF among risk groups in Nepal</li> <li>4. Advantage of Gene Xpert MTB/RIF For Pulmonary TB Suspects In Nepal.</li> <li>5. Gene-xpert Diagnosis of MDR TB with Gastric Lavage Aspirate</li> </ol>	Prof. Dr. Jeevan Sherchan TUTH	Bhagwan Maharjan NATA	
	Paper Presentation Session VI	Crystal Hall	Civil Society and Responsibility in TB Care and Support	<ol style="list-style-type: none"> <li>1. Way forward to TB elimination: Spotting TB in community through engagement of non-formal health care providers.</li> <li>2. Assessment of treatment outcome of TB patients treated under direct observation of Rural Health Providers: A Pilot Study.</li> </ol>	Dr. Md. Akramul Islam	Ram Sharan Gopali JANTRA	
11:30-11:45	Tea Time						
11:45-13:15	Paper Presentation Session VII	Durbar Hall	Research and Development/ Natural Disaster and TB	<ol style="list-style-type: none"> <li>1. Experience from Research projects on multi-drug resistant tuberculosis (MDR-TB) in Bangladesh.</li> <li>2. Early Detection of Tuberculosis Cases Among Internally Displaced People in Earth Quake Affected Districts of Nepal.</li> <li>3. Early response to address TB management during disaster, a key components in disaster settings.</li> </ol>	Dr. Mohammad Akhtar	Dr. Bhawana Shrestha, Genetup Head, NATA	

	Paper Presentation Session VIII	Crystal Hall	Tuberculosis	1. Active case finding of tuberculosis among smokers with high risk factors in a poor province of China. 2. Development and Implementation of Supervision and Patient Support Approach in Multi drug resistant TB management programme in Nepal. 3. Trial of empirical Anti-TB Treatment in Neck Nodes; is it justified?	Dr. Sharat C. Verma Director, STAC	Dr. Pramod Bhattari NTC	
13:15-14:15	Lunch	Regency					
14:15-15:45	Symposium III	Durbar Hall	Tobacco Control in SAARC Countries, where are we for achieving WHO FCTC Recommendation	1. FCTC & MPOWER Bangladesh Progress. 2. TOBACCO CONTROL IN NEPAL Act locally and Lead globally. 3. Tobacco Control in SAARC- The status of FCTC/MPOWER and recommendations to SAARC secretariat. 4. Tobacco Epidemic and Best Practices Control Policies- India	1. Khimanand a Bhusal, Under Secretary MOH, Nepal. 2. Dr. Sharat Chandra Verma		
	Workshop I	Crystal Hall	The Ethics of Health Research				
15:45-16:00	Tea Time						
16:00-17:30	Poster Presentation	Durbar Hall		1. Workplace TB Screening at Rice Mill Identified undiagnosed TB. 2. Diagnostic Yield of Consecutive Three Sputum samples from Smear Microscopy and Sputum Culture for PTB. 3. Factors Associated with MDR TB: A case control study from Kailali district from Far West Nepal. 4. Are MDR TB patients missed due to Incomplete History ?	Dr. Bhabana Shrestha	Dr. Ashish Shrestha	
	Workshop I (Continue....)	Crystal Hall	The Ethics of Health Research				
17:30-18:15	Closing Ceromeny	Durbar Hall					

**The End**

## KATHMANDU DECLARATION

3<sup>rd</sup> Conference of The UNION South East Asia Region (SEAR)

26<sup>th</sup> – 27<sup>th</sup> May, 2016, Kathmandu, Nepal

We, as the conference participants representing various agencies, community groups and people with tuberculosis of the South East Asia Region, recognize that every individual has the right to be protected from Tuberculosis and gain adequate support measures to cure his/her disease. We hereby declare to;

1. Ensure that the End TB Strategy is adopted and locally tailored to suit the country context and implemented through its effective operationalization with greater engagement of wider stakeholders;
2. Ensure that there is a progressive universal access to modern TB diagnosis technologies, including rapid DST, to all people in need and people with presumptive TB are identified at an early stage and have access to quality assured care possibly near to their place;
3. Ensure that NTPs and its stakeholders have a greater focus and appropriate strategies to reach the people who are yet to be reached by the programme including TB high-risk groups in rural and urban settings;
4. Ensure that basic TB diagnosis and all TB treatment services are provided free of cost to all, irrespective of their identity, living socioeconomic conditions and ability to pay;
5. Ensure that specialized child TB diagnosis and treatment services are made available at appropriate level of health care delivery;
6. Ensure tobacco prevention and control services are integrated in TB control programme and effectively delivered through routine primary health care settings with adequate capacity of health care providers especially on behavior change communication with the use of appropriate tools and techniques;
7. based new TB drugs and appropriate shorter regimen for DR TB services which are then delivered with adequate level of decentralized care with quality; Ensure that vulnerable groups and people with TB are placed at the heart of the response to disease and treated with dignity and respect with zero stigma and discrimination due to TB, irrespective of their socio-economic status, throughout the course of their therapy and rehabilitated in their communities, families and workplaces;
8. Ensure that political and social resources are mobilized to advocate for TB act that ensures TB as a notifiable disease and adequately secure rights of people with TB, their families, communities, care providers and others as relevant;
9. Advocate for local adaptation of evidence
10. Ensure adequate psychosocial and economic support and protection to people with TB and DR TB provisioned, delivered and evaluated within the National TB Programme with wider engagement of stakeholders;

11. Ensure that NTPs have appropriate measures to manage TB in emergency conditions with ability to respond as early as possible along with adequate preparedness measures put in place at various levels of health system;
12. Ensure that infection control measures are intact in health facilities and that risk assessment for the health care workers are performed routinely and managed accordingly;
13. Ensure that people with TB and their family members are sufficiently empowered and educated to practice infection control measures at their household, community and workplace settings;
14. Ensure strategic engagement of civil societies and community groups in every aspects of TB control- prevention, detection, treatment, care and support and rehabilitation;
15. Develop functional collaboration with medical schools and private health sector under the framework of mutual trust and partnership;
16. Promote research and development in national TB control program with strategic engagement of national and international academic and research institutions;
17. Generate evidence to understand catastrophic cost faced by people with TB and their households and design effective interventions to protect them from falling into poverty trap due to TB disease;

And to this effect, we commit to take forward the aforementioned declarations in areas of our work, and fully commit to End TB Epidemic, Tobacco Prevention and Control measures to prevent Lung Health related and other Non-Communicable Diseases that pose challenge to the health of the people of the region.

Thank you.



## List of the Participants

### LIST OF PARTICIPANTS OF THE 3rd SEAR CONFERENCE

KATHMANDU, NEPAL

26th and 27th May, 2016

S.NO	NAME	ORGANIZATION
1	Ambika Prasad Upadhyaya	NATA
2	Anil Bahadur Thapa	NTC
3	Arun Pratap Rana	NATA
4	Babu Kaji Shrestha	NATA
5	Basant Kumar Nepal	NATA
6	Bed Prasad Koju	NATA
7	Bijayananda Jha	NATA
8	Devendra Bahadur Pradhan	NATA
9	Dhurba Khadka	NTC/Co-Chair
10	Dr. Aashish Shrestha Medical Officer	NTC/ Co- Chair
11	Dr. Basista Rijal	TUTH / Chair
12	Dr. Bharat Pradhan (Chairman)	ANGHOS
13	Dr. Brajendra Srivastava	SRI BIRENDRA HOSPITAL
14	Dr. Buddha Basnet	Patan Hospital / Co-chair
15	Dr. D.K. Yadav	BPKIHS / Co-chair
16	Dr. Gauri Shankar Lal Das	Senior Chest Physician
17	Dr. Komal Kiran Pradhan	CHEST HOSPITAL
18	Dr. Kulesh Bahadur Thapa	BNMT
19	Dr. Pramod Raj Bhattarai	NTC / Co- chair
20	Dr. Pushpa Malla	Chair
21	Dr. Sharat Chandra Verma	SAARC TB/HIV / Chair
22	Dr. Susil Chandra Baral	HERD
23	Dr. Tarun Paudel, Director	NATIONAL AIDS/HIV CENTER
24	Gobardhan Shakya	NATA
25	Gopal Bahadur Singh	NATA
26	Gopal Shrestha	NATA
27	Harka Bahadur Shrestha	NATA
28	Kamal Rana	NATA
29	Keshab Shrestha	NATA
30	Kiran Man Pradhan	NATA
31	Krishna Kumar Shrestha	NATA
32	Machhindra Devi Shrestha	NATA

33	Madan Gopal Mainali	NATA
34	Madan Kaji Shrestha	NATA
35	Mahendra Gopal Karmacharya	NATA
36	Man Bahadur Khadgi	NATA
37	Miraz Roshan Thakuri	FAITH
38	Narayan Prasad Shrestha	NATA
39	Niran Man Shrestha	NATA
40	Prof. Dr. Jeevan Sherchan	TUTH/ Chair
41	Radha Devi Maskey	NATA
42	Raj Kishor Prasad Yadav	NATA
43	Rajan Bhattarai	SCI
44	Rajan Shrestha	NATA
45	Ram Sharan Gopali	JANTRA
46	Dr.Ramautar Prasad Khetan	NATA
47	Rana Prasad Rana	NATA
48	Shanta Lal Mulmi	RECPHEC
49	Shashi Panthi	NATA
50	Shobha Shakya	NATA
51	Shrawan Ranjit	HSWO
52	Singh Bahadur Karki	NATA
53	Sanjeev Jha	SAARC
54	Thir Bahadur K.C	NATA
55	Aroja Maskey	BNMT
56	Bijay Maharjan	Jantra
57	Dr. Rhashi Tamarakar	NATA Lalitpur
58	Dr. Ajith P. Weerakoon	STAC/ Co-Chair/ SAARC
59	Dr. Pratap Premanand Jayavant	IOM/ Personal
60	Dr. Rama Jayavant	IOM/ Personal
61	Enfink walker	Herd
62	Kailash Karki	SAARC
63	Shaki Thapa	BNMT
64	Madan Kumar Piya	National Hospital
65	Manan karki	patan Hospital
66	Menuka Bhasima	Jantra
67	Mila shakya	patan Hospital
68	Parbati Thapa	Jantra

71	Raghu Prasad Dhital	BNMT
72	Sanjeev Kumar	Herd
73	Satya Raj Shakya	DPHO Rupandhehi
74	Shikha Upadhaya Khatiwada	BNMT
75	Shyam lal kandel	Herd
76	Sudhir Rai	Jantra
77	Sunil Pokharel	patan Hospital
78	Alessio Mola	Global Drug Facility
79	Chaudhary Muhammad Nawaz	PATA
80	Dr. Rana J. Singh	The Union-South East Asia
81	Dr. Tara S. Bam	The Union-Singapore
82	Dr. Win Maung, Myanmar	MATA
83	Mukul Khairuddin Ahmed	NATAB
84	Dr. Chrisprin Kambili	Global Medical lead Infectious Disease, Janson
85	Xiaolin Wei	The UNION/ Secretary General
86	Vijay Kumar Arora	India
87	Rajni Khan	The Union
88	Aminul Islam Sujan	Bangladesh Anti Tobacco Alliance/ Journalist
89	Dr. Fatema Khatun	BRAC
90	Joshnara Begum	Damien Foundaition
91	Md. Zobair Hossain	Damien Foundaition
92	Rifat Mafuza	BRAC
93	Archana Trivedi	The Union
94	Md.Akramul Islam	BRAC
95	Dr. Afroza Islam	BRAC
96	Dr. Md Abul Khair Basher	BRAC
97	Dr. Md. Mesbah-Ul-Haque	BRAC
98	Kamala Wagle	NTC
99	Dr. Suraj Dhaubadel	NTC
100	Gokarna Raj Ghimire	NTC
101	Tul Prasad Timalisina	Action Nepal
102	Bharat Bikram Shah	Action Nepal
103	Anand Bahadur Chand	Action Nepal
104	Sarala Khadka	NTC
105	Puspa Chettri	NTC
106	Lok Raj Joshi	NTC

107	Samiksha Ghimire	Nepal
108	Nomampondo Barnabas	The Union
109	Anit Kumar Mishra	IOM
110	Kanchan Gautam	IOM
111	Md. Akhtar	WHO
112	Jason Williams	Jansen, Johnson & Johnson pvt. Ltd
113	Anand Rishi	Johnson
114	Dr. Vijakumar Kadam	Johnson
115	Dr. Suman Thapa	SCI
116	Dr. Sukesh Shrestha	SCI
117	Apurva Narain	EAG
118	Dr. Karuna Sagili	EAG
119	Jamie Tonsing	The Union
120	Vikas Panibatla	TB Alert

## Congratulations Messages

I want to give you my heartiest thanks for arranging a pleasing and informative 3<sup>rd</sup> SEAR Conference . In your leadership the 3<sup>rd</sup> SEAR Conference was got a fruitful shape in every aspect. I'm sure Nepal will reach in curing all types of chest diseases at the top most level through sincerity, commitment and hard work of your people.

**-Khairuddin Ahmed Mukul**  
**Secretary General,**  
**NATAB**

I want to give you my heartiest thanks again for arranging a pleasing and informative 3<sup>rd</sup> SEAR Conference . In your leadership the 3<sup>rd</sup> SEAR Conference got a fruitful shape in every aspect.

**-Khairuddin Ahmed Mukul**  
**Secretary General,**  
**NATAB**

Prof Xiaolin Wei, Secretary General of The Union

***“It was a massive effort by the Nepal Anti Tuberculosis Association to hold a conference in Kathmandu. The earthquake two years ago was devastating... I congratulate everyone in successfully hosting this conference in such a challenging situation.”***

Xiaolin says: “It was a massive effort and a great success of Nepal Anti Tuberculosis Association (NATA) to hold a conference in Kathmandu. The earthquake two years ago was devastating and many people are still displaced and continue living in tents,” he says. “There are very limited financial resources for NATA while it has to overcome the paramount logistic challenge as well. A year ago, it was suggested that a regional meeting instead of a conference would be the way forward. But in the end NATA decided to continue to host it as a conference. “I congratulate Mr. Devendra Bahadur Pradhan, the President of NATA, and all other organising committee members in successfully hosting the conference, in such a challenging situation.”

**-Prof Xiaolin Wei,**  
**Secretary General of The Union**

Thanks for this appreciation. I would like to take this opportunity to congratulate you and NATA team for a great success of the Union Conference!

Sorry that I couldn't attend all events.

**-Rajan Bhattarai**  
**Save The Children**

Congratulations for organising a successful conference.

**Dr Jamhoih (Jamie) Tonsing|**  
**Regional Director-The Union South-East Asia Office**  
**International Union Against Tuberculosis and Lung Disease (The Union)**

I was almost in tears when Devandra told us about the challenges of the Tb staff since the earthquake. The best quote of his description was when he said that most of the staff was still working out of tents but they could do their work and everyone was grateful for that.

I just want to congratulate you and tell you I wish I could have been amongst the attendees.

Thank you for your leadership in putting the conference together and I look forward to working with you on The Union Board and in the fight against TB.

**-Jane**  
**President**  
**The Union**

First of all let me congratulate you and all the organizing committee members for successfully organizing The 3rd Conference of The Union SEAR in Kathmandu.

Thank you once again and looking forward to hearing from you.

**-Shanta Lall Mulmi**  
**Executive Director**  
**Resource Centre for Primary Health Care(RECPHEC)**  
**Bagbazar, Kathmandu**  
**P.O.Box:117, Ph.: 977-1-4243891, Fax: 977-1-4225675**  
**Mobile: 977-98510-56303**  
**Email: [recphec@info.com.np](mailto:recphec@info.com.np),**  
**website: [www.recphec.org.np](http://www.recphec.org.np)**

Nice to meet u. Keep in touch. I will be happy to visit again given the opportunity congratulates to all members of ur team for excellent coordination.

**-Prof (Dr) V. K. Arora**  
*Presently Vice Chancellor*  
*Santosh University, NCR Delhi*  
**Executive Editor- Indian Journal of Tuberculosis**

We have heard such wonderful and positive news from the conference - congratulations to you and your team.

**-Louisa Stewart | Consultant - Membership**  
**IUALTD (The Union)**

Congratulations for organizing the conferences successfully. It is indeed a great contribution to advance TB Control and other associated health programs in Nepal and the region. We are grateful to be the part of your team.

**-Tara**  
**Tara Singh Bam, PhD, MPH,**  
**Regional Advisor–Tobacco Control,**  
**Asia Pacific**



## **Independent Auditor's Report**

### **The Members of Nepal Anti-Tuberculosis Association (NATA)**

We have audited the accompanying financial statements of Nepal Anti-Tuberculosis Association (NATA), which comprise the Balance Sheet as at 31 Ashad 2073, Statement of Income & Expenditure and Fund Accountability Statement for the period from 1 Shrawan 2072 to 31 Ashad 2073 and a summary of Significant Accounting Policies and Other Explanatory Notes.

### **Management's Responsibility for the Financial Statements**

Management is responsible for the preparation and fair presentation of these financial statements in accordance with generally accepted accounting principles. This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation and presentation of financial statements that are free from material misstatement, whether due to fraud or error, selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

### **Auditor's Responsibility**

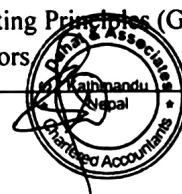
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Nepal Standards on Auditing (NSA). Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in financial statements. The procedures selected depend on our professional judgment, including the assessment of risk of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider the internal control relevant to the NATA's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of NATA's internal control. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of the accounting estimates made by the management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### **Auditor's Opinion**

In our opinion, the financial statements give a true and fair view, in all the material respects, the financial position of NATA as at 31 Ashad 2073 and of the results of its financial performance for the year then ended in accordance with Generally Accepted Accounting Principles (GAAP) in compliance with the prevailing laws and terms of agreement with donors.





568,868.00	<b>Public Health Department</b>	484,521.00
10,348.00	World TB Day Expenses	-
19,341.00	National TB Day	19,320.00
30,000.00	Otsuka award.	25,000.00
15,001.00	Dr. Narayan Govinda Amatya Memorial Award	15,001.00
10,000.00	Kamal Rana Volunteer Award	-
350,500.00	District Program	380,000.00
20,000.00	ANGHOS Membership Fee	-
59,890.00	Insight Printing	-
27,120.00	Radio broadcasting	22,600.00
26,668.00	TV broadcasting	22,600.00
-	<b>SEAR Conference</b>	<b>3,329,817.82</b>
-	<b>Expenses</b>	<b>2,311,733.75</b>
-	Conference Management	714,171.30
-	Lunch/Dinner	901,039.20
-	Printing/Stationary	243,840.75
-	Souvenir/Nutshell publication	131,022.50
-	Human Resource	144,000.00
-	Media/advertisement	100,000.00
-	Photography	31,900.00
-	Misc Expenses	45,760.00
-	<b>SEAR Board Meeting Expenses</b>	<b>1,018,084.07</b>
-	(Expenses includes Air Fare for SEAR Board Members/ Transportation/Lodging/Per Diem Dinner/Meeting Venue/Management Cost/Misc Expenses)	
<b>7,955,485.80</b>	<b>Total</b>	<b>10,199,509.72</b>







**Institutional Fund**

FY 2071/72

Amount Rs.	Particulars
2,727,811.00	Human Resource Expenses
2,326,664.00	<b>Administrative Department</b>
2,195,245.00	Salary and allowance
131,419.00	Gratuity Expenses
401,147.00	<b>Public Health Department</b>
384,263.00	Salary and Allowance
16,884.00	Gratuity Expenses
3,764,856.55	<b>Administrative Expenses</b>
2,600,668.64	<b>Administrative Department</b>
37,738.00	Printing and Stationery
270,631.98	Fuel Expenses (Vehicle)
286,171.50	Fuel Expenses (Generator)
17,824.00	Consumables (Electrical goods)
172,099.54	Repair & Maintenance "
24,869.00	Miscellaneous Expenses
3,500.00	Bank Locker Annual Fee
30,420.00	Guest Entertainment
34,391.00	Uniform Expenses
39,137.20	Advertisement
21,980.00	DSA
29,910.00	Postal expenses
215,000.00	X Ray Machine Repair
3,500.00	Newspaper and Periodicals
8,000.00	Economic Support
96,000.00	House Rent
20,242.98	Insurance
467,162.00	2% tax expenses
302,091.44	PBST Nirman
420,000.00	Honorarium
80,000.00	Audit Expenses
20,000.00	Website Developing
1,164,187.91	<b>Public Health Department</b>
41,760.00	Printing and Stationery
97,681.90	Electricity Expenses
27,503.76	Water Expenses
61,035.28	Telephone Expenses
163,220.50	Repair & Maintenance
145,870.23	Consumables
25,368.00	Advertisement and Broadcasting
33,279.00	Guest Entertainment
185,016.98	Travel & Fuel (Vehicle)
161,597.00	Travel & Fuel (Generator)
37,748.00	Miscellaneous Expenses
83,876.26	IUALTD Fee & Expenses
16,950.00	Publication and Educational Materials
64,410.00	Calendar Printing
-	Lab Goods & Chemicals
18,871.00	Dashain program
1,462,818.25	<b>Program Expenses</b>
893,950.25	<b>Administrative Department</b>
271,033.00	Central EC meeting and daily Allowance
355,899.25	General Assembly
267,018.00	IUALTD Conference expenses

**Annexure 8**

FY 2072/73

Amount Rs.
2,569,831.00
2,175,239.00
2,175,239.00
394,592.00
345,600.00
48,992.00
3,043,042.90
2,060,615.42
69,255.48
428,047.87
324,341.03
19,068.39
176,452.00
102,077.62
3,500.00
-
52,800.00
102,671.00
42,270.00
30,516.00
-
14,050.00
32,000.00
96,000.00
18,917.03
48,649.00
-
420,000.00
80,000.00
-
982,427.48
-
141,817.13
79,181.00
44,349.43
-
33,170.00
-
78,229.00
-
-
-
168,658.83
59,212.00
64,410.00
313,400.09
-
1,256,818.00
772,297.00
236,126.00
536,171.00
-

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**Nepal Anti - Tuberculosis Association (NATA)**  
Kalimati, Kathmandu

**Statement of Income and Expenditure**  
For the period 1 Shrawan 2072 to 31 Ashad 2073

FY 2071/72 Amount Rs.	Particulars	Annex	FY 2072/73 Amount Rs.
	<b>Income</b>		
43,535,381.72	Grant Received		41,260,559.76
33,772,406.14	NSA Fund		-
-	Save the Children		37,286,373.06
4,000,000.00	NTC Fund ( Kalimati Chest Hospital)		3,000,000.00
5,762,975.58	GENETUP		974,186.70
330,478.77	Research income from Warun/OMNI Gene		595,829.75
862,654.01	Interest income		615,838.81
2,432,460.00	Rental Income		2,490,120.00
1,980,582.53	Service/Bed Charge Income		2,142,615.33
4,104,001.12	Other Income / Donation		3,998,140.17
454,962.00	Rental Tax Received from KEC		45,600.00
-	Third SEAR Conference		4,718,464.12
109,261.01	Exchange Gain		200,371.05
<b>53,809,781.16</b>	<b>Total Income</b>		<b>56,067,538.99</b>
	<b>Expenditure</b>		
19,881,936.49	Program Expenses		17,243,681.12
15,083,535.27	NSA Fund	5	-
-	Save the Children		12,735,407.18
145,004.55	Kalimati Chest Hospital Program Expenses	6	131,637.00
3,190,578.42	GENETUP Program Expenses	7	3,119,818.94
1,462,818.25	Program Related Expenses from Core Fund	8	1,256,818.00
<b>25,784,035.81</b>	<b>Human Resource Expenses</b>		<b>28,118,666.63</b>
17,002,886.00	NSA Expenses	5	-
-	Save the Children		19,694,692.01
2,812,581.27	Kalimati Chest Hospital Expenses	6	2,462,344.97
3,240,757.54	GENETUP Expenses	7	3,391,798.65
2,727,811.00	Core Fund Expenses	8	2,569,831.00
<b>9,382,584.13</b>	<b>Administrative Expenses</b>		<b>13,035,449.85</b>
1,432,655.77	NSA Expenses	5	-
-	Save the Children		4,856,273.87
1,164,194.04	Kalimati Chest Hospital Expenses	6	443,703.03
3,020,877.77	GENETUP Expenses	7	1,362,612.23
3,764,856.55	Core Fund Expenses	8	3,043,042.90
-	SEAR Conference	8	3,329,817.82
<b>249,479.85</b>	<b>Depreciation</b>	4	<b>219,161.25</b>
<b>55,298,036.28</b>	<b>Total Expenditure</b>		<b>58,616,958.85</b>
<b>(1,488,255.12)</b>	<b>Surplus (Deficit) during the year</b>		<b>(2,549,419.86)</b>

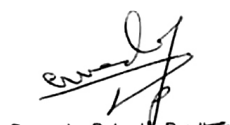
Significant Accounting Policies & Explanatory Notes  
Annexure 4 to 8 form integral part of this statement


As per our report of even date

  
Ram Kaji Karki  
Sr. Accountant

  
Mahendra Gopal Karmacharya  
Act. Treasurer

  
Madan Kaji Shrestha  
Secretary General

  
Devendra Bahadur Pradhan  
President

  
CA Sudip Dahal  
S. Dahal & Associates  
Chartered Accountants

Date : 2073/06/11  
Place : Kathmandu



**Nepal Anti - Tuberculosis Association (NATA)**  
Kallimati, Kathmandu

**Fund Accountability Statement**  
For the period 1 Shrawan 2072 to 31 Ashad 2073

S.N.	Particulars	Annex	NSA	Save the Children	Chest Hospital	GENETUP	Institutional	Total
<b>A</b>	<b>Opening Balance</b>	<b>2</b>						
1	Bank Balance		1,111,829.07	-	517,310.02	15,173,564.52	11,249,419.60	28,052,123.21
2	Cash balance		-	-	7,000.00	20,000.00	-	27,000.00
3	Advance & Deposit		607,544.91	-	40,000.00	1,040,647.86	387,556.82	2,075,749.59
4	Fixed Assets		-	-	-	-	1,153,205,457.33	1,153,205,457.33
5	Less: Payable		(477,050.95)	-	(194,500.00)	(20,000.00)	(2,685,990.10)	(3,377,541.05)
	<b>Total (A)</b>		<b>1,242,323.03</b>	<b>-</b>	<b>369,810.02</b>	<b>16,214,212.38</b>	<b>1,162,166,443.65</b>	<b>1,179,982,789.08</b>
<b>B</b>	<b>Fund Received</b>							
1	Grant Received		-	37,286,373.06	3,000,000.00	974,186.70	-	41,260,559.76
2	Research income from Warun/OMNI		-	-	-	595,829.75	-	595,829.75
3	Interest Income		-	-	13,318.08	313,430.50	289,090.23	615,838.81
4	Rental Income		-	-	-	-	2,490,120.00	2,490,120.00
5	Service Charge Income/Bed Charge		-	-	109,533.33	-	2,033,082.00	2,142,615.33
6	Other Income & Donation		-	-	194,900.00	-	-	194,900.00
7	Admission Charge		-	-	29,306.67	-	-	29,306.67
8	Income from NSA for BSC Maintenance		-	-	-	-	-	-
9	Income from NSA for Nutrition Support		-	-	-	2,554,000.00	-	2,554,000.00
10	Income from Insurance for Medical		-	-	-	26,725.00	-	26,725.00
11	Lab C/S charge		-	-	-	412,300.00	-	412,300.00
12	Bench Charge		-	-	-	60,000.00	-	60,000.00
13	GENETUP Income		-	-	-	-	105,612.00	105,612.00
14	Paying clinic		-	-	-	-	2,390.00	2,390.00
15	Miscellaneous Income		-	-	-	237,096.50	375,810.00	612,906.50
16	Rental Tax Received from KEC		-	-	-	-	45,600.00	45,600.00
17	Third SEAR Conference - Donation		-	-	-	-	3,038,272.00	3,038,272.00
18	Third SEAR Conference - Registration		-	-	-	-	660,472.12	660,472.12
19	Third SEAR Conference - Donation BoD Meeting		-	-	-	-	1,019,720.00	1,019,720.00
20	Exchange Gain		-	-	-	64,888.00	135,483.05	200,371.05
	<b>Total (B)</b>		<b>-</b>	<b>37,286,373.06</b>	<b>3,347,058.08</b>	<b>5,238,456.45</b>	<b>10,195,651.40</b>	<b>56,067,538.99</b>
<b>C</b>	<b>Fund Expenses</b>	<b>5-8</b>						
1	Program Expenses		-	12,735,407.18	131,637.00	3,119,818.94	1,256,818.00	17,243,681.12
2	Human Resource Expenses		-	19,694,692.01	2,462,344.97	3,391,798.65	2,569,831.00	28,118,666.63
3	Administrative Expenses		-	4,856,273.87	443,703.03	1,362,612.23	3,043,042.90	9,705,632.03
4	SEAR Conference		-	-	-	-	3,329,817.82	3,329,817.82
5	Depreciation		-	-	-	-	219,161.25	219,161.25
	<b>Total (C)</b>		<b>-</b>	<b>37,286,373.06</b>	<b>3,037,685.00</b>	<b>7,874,229.82</b>	<b>10,418,670.97</b>	<b>58,616,958.85</b>
<b>D</b>	<b>Surplus/(Deficit) for the year (B-C)</b>		<b>-</b>	<b>-</b>	<b>309,373.08</b>	<b>(2,635,773.37)</b>	<b>(223,019.57)</b>	<b>(2,549,419.86)</b>
<b>E</b>	<b>Revaluation Reserve</b>		<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(280,458.74)</b>	<b>(280,458.74)</b>
<b>F</b>	<b>Closing Balance (A+D+E)</b>		<b>1,242,323.03</b>	<b>-</b>	<b>679,183.10</b>	<b>13,578,439.01</b>	<b>1,161,652,965.34</b>	<b>1,177,152,910.48</b>
	<b>Represented BY</b>	<b>3</b>						
1	Bank Balance		686,193.02	-	785,125.10	13,518,439.01	11,204,192.54	26,193,949.67
2	Cash balance		-	-	7,000.00	20,000.00	-	27,000.00
3	Advance & Deposit		607,544.91	-	40,000.00	60,000.00	677,266.82	1,384,811.73
4	Fixed Assets		-	-	-	-	1,152,933,727.34	1,152,933,727.34
5	Less: Payable		(51,414.90)	-	(152,942.00)	(20,000.00)	(3,162,221.36)	(3,386,578.26)
	<b>Total</b>		<b>1,242,323.03</b>	<b>-</b>	<b>679,183.10</b>	<b>13,578,439.01</b>	<b>1,161,652,965.34</b>	<b>1,177,152,910.48</b>

Significant Accounting Policies & Explanatory Note 9  
Annexure 1 to 9 form integral part of this statement

As per our report of even date

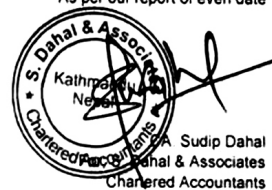
  
Ram Kaji Karki  
Sr. Accountant

  
Mahendra Gopal Karmacharya  
Act. Treasurer

  
Madan Kaji Shrestha  
Secretary General



  
Devendra Bahadur Pradhan  
President

  
S. Dahal & Associates  
Chartered Accountants  
Kathmandu

Date : 2073/06/11  
Place : Kathmandu

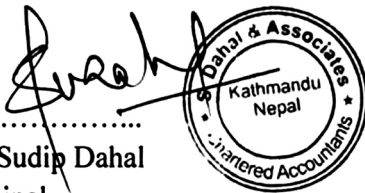


### **Report on Other Legal and Regulatory Requirements**

On the basis of our audit, we further report that:

1. We have obtained all the information and explanations, which to the best of our knowledge and belief were necessary for the purpose of our audit.
2. The Balance Sheet, Statement of Income & Expenditure and Fund Accountability Statement conform to the books of accounts of NATA. The books of account and records are properly maintained in accordance with the prevailing laws.
3. Except as discussed in Note 6, We did not come across any cases where the Executive Committee or any members thereof or any representative or any office bearer or any employee of the organization has acted deliberately contrary to the provisions of the law or caused losses or damage to the organization or committed any misappropriation or fraud, nor have we been informed of any such case by the management.

.....  
CA. Sudip Dahal  
Principal  
S. Dahal & Associates  
Chartered Accountants



Date: 11 Ashwin 2073

Place: Kathmandu

