

# Touching *Lives* Improving *Health*



**Centre for Chronic  
Disease Control**

A World Health Organization (WHO)  
& Indian Council of Medical Research  
(ICMR) Collaborating Centre



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September 2025



# TABLE OF CONTENTS

<b>Our Journey</b>	04
<b>A Journey of Purpose</b>	06
<b>A Legacy of Dedication</b>	08
<b>The Evolution of a Vision</b>	10
<b>Milestones on Our Journey</b>	16
<b>Partnering for Progress</b>	34
<b>The Road to India@100</b>	44
<b>Thank You to Our Partners</b>	46

# Our Journey

Twenty-five years ago, the Centre for Chronic Disease Control (CCDC) was founded with a clear purpose: to confront the rapidly rising burden of non-communicable diseases in India.

At the time, Non-Communicable Diseases were beginning to emerge as a significant public health concern, but they were not yet at the centre of national conversations. We knew this tide was going to grow quickly, and it did.



Over the past two decades, NCDs have become the leading cause of death and disability in India. That reality demanded novel and innovative responses, and CCDC responded to this emerging challenge.



From the outset, we built CCDC as a space where innovation and ethics could meet. We have worked to bridge the gap between research and public health practice, academic findings and national policy, and

global lessons and local realities. Along the way, we have taken bold steps, from leading landmark epidemiological studies to co-developing interventions on scale; from designing digital platforms that guide clinical care to training thousands of health professionals nationwide.

What has remained constant over these 25 years is our belief in collaboration. The work of CCDC has never been ours alone. The large body of work has been supported and shaped by our partners in government, other research institutions, healthcare delivery professionals, civil society, international and national collaborations, and local communities. Together, we have generated evidence, implemented them, reimagined health system transformation, and pushed the boundaries of what's possible in public health.

As we look to India@100, our work is more relevant than ever. The role of the health sector now is taking primacy in the national consciousness. It is striving to be at the core of decision-making by driving the “Health in all policies” dialogue. In an ideal

and developed India, the treatment for an acute-catastrophic illness resulting from a chronic disease should be both accessible and affordable. In a truly developed India, no family should get into poverty because of an acute catastrophic illness resulting from a chronic disease.

Achieving this ambition calls for innovation and adaptation of new tools, big data, artificial intelligence, and precision medicine, backed by enduring values such as equity, ethics, and community engagement. The challenges ahead are complex, but I believe we are better prepared than ever to meet them. CCDC is a fortunate witness to a generation of passionate researchers and public health leaders across India, many of whom we have been privileged to mentor and work with. With this shared acumen and aspiration, we are committed to leveraging our collective strengths and innovative approaches to address chronic diseases in the country and globe.

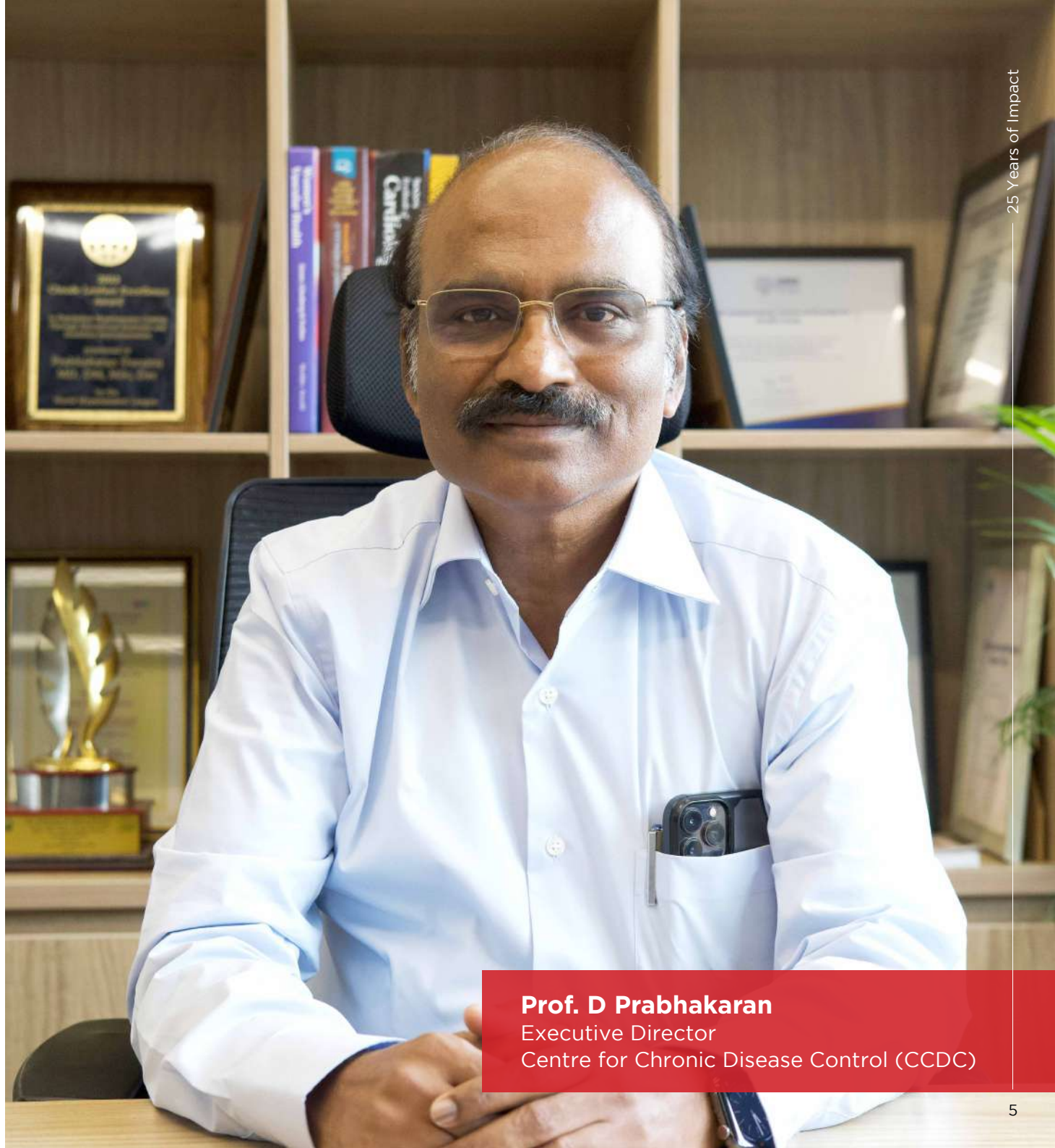
To everyone who has been part of this journey, our founders, colleagues, funders, field teams, and partners in India and



worldwide, thank you. I would particularly like to mention **Prof. K Srinath Reddy**, who envisioned CCDC, the Late **Professors Rajendra Tandon** and **M K Bhan**, who guided us during their tenure as President of CCDC, and **Prof. S C Manchanda**, the current President. In addition, I wish to thank all my past and present colleagues, our international and national collaborators, our funders, and the various research participants. Your trust and commitment have made this milestone possible.

This 25-year mark is not a finish line. It is a reminder of what sustained purpose can achieve. And it is a call to action for all of us who care about our country's health, equity, and future.

***Let's keep building together.***



**Prof. D Prabhakaran**  
Executive Director  
Centre for Chronic Disease Control (CCDC)

# A Journey of Purpose

**Celebrating 25 years of Transforming Lives & Healthcare.** Founded in 2000, the Centre for Chronic Disease Control (CCDC) is today a leader in chronic disease research.

Thus far, the CCDC has generated the **evidence base on chronic diseases, developed and implemented contextual interventions,**

**built capacity, and assisted public health systems in consonance with its vision and mission.**

Looking ahead to the centenary year of India's independence, **the CCDC's mission aligns closely with our country's vision for a healthier Nation.**









## Chapter 1

# A Legacy of Dedication

## Laying the Foundation: A Vision Ahead of Its Time

In the 1990s, public health conversations in low- and middle-income countries like India were largely focused on infectious diseases and maternal and child health. Non-communicable diseases like diabetes, hypertension, and heart disease were rising steadily, but remained in the shadows — seen by many as rare or limited to the wealthy. The quiet truth, however, was that NCDs were already taking root across communities, waiting to emerge as a major public health challenge.



## But a quiet shift was taking place.

In 1997, the World Health Organization (WHO) called for global action on NCDs. This led to the launch of the Initiative for Cardiovascular Health in Developing Countries (ICHealth), designed to strengthen research and advocacy. India was chosen to host the Secretariat under the leadership of Prof. K Srinath Reddy, then a Professor of cardiology at AIIMS Delhi.

In 2000, the Centre for Chronic Disease Control (CCDC) was established to serve as the Secretariat of ICHealth. What began as a small group of around ten people soon grew into a mission-driven large organization with a bold vision: to understand, prevent, and manage chronic diseases at scale. From those modest beginnings, CCDC has grown to nearly 200 members today. Over the years, CCDC's work has grown to encompass large-scale trials, health technologies, and environmental health. But the foundation of its success remains rooted in those early years of bold experimentation, coalition-building, and mission-driven science-shaped in India, and for India.

Today, we carry that spirit forward by driving high-quality research, creating affordable solutions, and strengthening health systems to better equip the country in its fight against chronic diseases.





## Founding Members

Several pioneering public health leaders were instrumental in the inception of CCDC and guiding its early journey.



**Prof. Rajendra Tandon**



**Prof. K Srinath Reddy**



**Prof. D Prabhakaran**



**Dr Shifalika Goenka**



**Dr Lakshmi Ramakrishnan**



**Dr Manoj Singh**



**Dr Pankaj Shah**



**Dr Hemraj Pal**

## Chapter 2

# The Evolution of a Vision

From its inception, CCDC has pioneered efforts to address chronic diseases. The formative years were driven by passion and ambition, guided by scientific expertise, and focused on creating research and interventions that make a real impact, blending traditional approaches, such as yoga, with modern digital and technological solutions.

As a leader in large-scale epidemiological studies on cardiometabolic health and NCDs in India, CCDC has consistently launched innovative and timely programs, built on rigorous study designs and strategic collaborations that set new benchmarks in the field.

## Establishing CCDC as a Research Leader

Over the years, CCDC has emerged as a leading force in cardiovascular and NCD research in India. Since 2016, it has maintained a dedicated group focused on addressing environmental determinants of cardiovascular health and a broader spectrum of NCDs. CCDC drives high-impact work across diverse areas, including epidemiology, environmental health,

digital health, implementation science, clinical trials, medical statistics and data management, nutritional epidemiology, bio-lab and genetic epidemiology, yoga in public health, cardiology imaging core lab, cancer epidemiology, and evidence-based medicine. Its efforts span large-scale population studies and clinical trials, as well as innovative interventions such as using yoga for cardiac rehabilitation. By combining scientific rigour with practical, context-specific solutions, CCDC has consistently set new benchmarks for research, policy, and action in India.









We didn't just conduct studies, we built the context-specific frameworks through which public health in India, could be understood, measured, and improved for generations to come, in the context of chronic diseases.



### **Dr Shifalika Goenka**

Deputy Director and Head of Health Promotion, Physical Activity, and Obesity Prevention, CCDC

## **Building the Foundation for Digital Health**

CCDC's journey in digital health began nearly two decades ago, at a time when technology was only beginning to enter Indian healthcare. Partnering with All India Institute of Medical Sciences (AIIMS), New Delhi, Public Health Foundation of India, and Emory University, the organization explored innovative approaches like Task Sharing and Clinical Decision Support Systems, harnessing mobile health (mHealth) to strengthen care across all levels of the health system. Through iterative testing and refinement, these digital interventions evolved, culminating in milestones such as the ITREC study, which successfully integrated mHealth tools into the government's NP-NCD portal.



Aligning with national, regional, and global priorities on reducing inequities in healthcare access, CCDC expanded its focus to bridge gaps in NCD care through the BRIDGE Centre for Digital Health. By designing digital solutions that account for disparities in digital literacy, the Centre ensures equitable access to care. Programs like the assisted telemedicine initiative, DigiSetu, exemplify how technology can extend quality healthcare to underserved communities, advancing the broader goal of Universal Health Coverage.







What stands out most from the journey are the stories from patients. In places like Solan and Karnal, people shared how their experience of care had transformed. They spoke of less waiting time, spending more time with nurses, receiving clearer instructions, and feeling looked after. The quality of care felt more human, even though it was delivered through a digital tool. We are proud of how far we have come, not just in building a tool, but in helping shape a more responsive and tech-enabled public health system.



**Dr Dev Jindal**  
Head, Health Systems Unit, CCDC



## Global Recognition and Impact

The hallmark of CCDC's journey has been its commitment to research that is contextualized, responsive to local needs, and mindful of available resources, delivering low-cost, innovative, and sustainable solutions for India's health system.

This approach has earned CCDC recognition both nationally and internationally:



**Collaborating Centre of Excellence for Biomedical Research**, designated by the Indian Council of Medical Research (ICMR)



**WHO Collaborating Centre for Surveillance, Capacity Building, and Translational Research in Cardio-Metabolic Diseases**



विज्ञान एवं  
प्रौद्योगिकी मंत्रालय  
MINISTRY OF  
**SCIENCE AND  
TECHNOLOGY**

**Scientific and Industrial Research Organization (SIRO)**, recognized by the Department of Scientific and Industrial Research (DSIR), Ministry of Science and Technology, Government of India

भारत सरकार  
GOVERNMENT OF INDIA

विज्ञान और प्रौद्योगिकी मंत्रालय  
MINISTRY OF SCIENCE AND TECHNOLOGY



जैवप्रौद्योगिकी विभाग  
DEPARTMENT OF  
**BIOTECHNOLOGY**

**Centre of Excellence in Clinical Research**, recognized by the Clinical Development Service Agency, Department of Biotechnology, Government of India

These honours reflect CCDC's sustained impact in advancing research, building capacity, and translating evidence into meaningful health outcomes.







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## Chapter 3

# Milestones on Our Journey

## 2000

The **Centre for Chronic Disease Control (CCDC)** was established to address challenges of a rapidly evolving health landscape in low- and middle-income countries



## 2002

Created a **model surveillance system** for cardiovascular diseases and risk factors among India's industrial workforce, a **first-of-its-kind effort**



## 2002

**Collaborated in an international clinical trial** addressing glycaemic control in diabetes care



## 2004

Ventured into **cancer research**: evaluating the role of diet





## 2009

Launched a large-scale **capacity building programme in NCD epidemiology and prevention**, training researchers and practitioners across India and beyond



## 2010

Set up the Secretariat for the **region's largest multicentric, population-based cohort study** on cardiovascular disease and risk factors in South Asia



## 2010

Built an institutional **state-of-the-art laboratory facility** to support advanced clinical, epidemiological and population research



## 2012

Designated as a **Scientific & Industrial Research Organization (SIRO)** by the Department of Scientific & Industrial Research (DSIR), Ministry of Science and Technology, Government of India



सत्यमेव जयते

विज्ञान एवं  
प्रौद्योगिकी मंत्रालय  
MINISTRY OF  
SCIENCE AND  
TECHNOLOGY

## 2012

Deployed an indigenous **Clinical Decision Support System (CDSS)** to strengthen primary care for chronic conditions



## 2013

Pioneered the **first clinical trial on yoga-based cardiac rehabilitation** for patients recovering from acute myocardial infarction



## 2014

Designated as a **World Health Organization (WHO) Collaborating Centre** for Surveillance, Capacity Building and Translational Research in Cardio-Metabolic Diseases



WHO Collaborating Centre for  
Surveillance, Capacity building  
and Translational Research in  
Cardio-Metabolic Diseases

## 2015

Recognized as a **Centre of Excellence in Clinical Research** by the Clinical Development Service Agency, Department of Biotechnology, Government of India



सत्यमेव जयते

**DEPARTMENT OF BIOTECHNOLOGY**  
Ministry of Science & Technology  
Government of India



## 2016

Partnered to launch an integrated research and training programme on the **health impacts of environmental determinants**, with policy relevance



## 2017

Showcased the **mPower Health Platform**, CCDC's CDSS, at Rashtrapati Bhavan and the National Public Health Summit



## 2021

Launched the **Cardiology & Endocrinology Masterclass Programme** for strengthening capacity of DM/DNB fellows



## 2022

Led a landmark **clinical trial in India**, evaluating the effectiveness of two-drug combination therapies in improving blood pressure control





## 2022

Partnered with **AEEE** (Alliance for an Energy Efficient Economy) and **MoHFW** (Ministry of Health & Family Welfare) for **India's first nationwide hospital energy consumption survey** measuring the health sector's energy footprint



## 2023

Recognized as an **Indian Council of Medical Research's (ICMR) Collaborating Centre of Excellence** for Biomedical Research



## 2023

Empanelled as an **Academic Research Organization (ARO)** from India for the Cognitum Consortium



## 2023

Established the **Bridge Centre for Digital Health**, dedicated to promoting equity and enhancing access through digital healthcare solutions





## 2024

Awarded the **ICMR's Prestigious Centre for Advanced Research (CAR)** for Rural Health Care Transformation



## 2024

Recognized as one of the six '**Most Engaging Collaborating Centres of Excellence**' by the ICMR



## 2024

Awarded the first **National Health Research Priority Project by ICMR**, reflecting national confidence in CCDC's research and leadership



## 2025

Awarded the **second National Health Research Priority Project by ICMR**



Initiated an integrated and co-developed programme for **detecting and managing cardiometabolic risks in older Indians**, supported by the National Institute for Health and Care Research (NIHR), UK





## Key Initiatives for Public Health

### Addressing India's NCD Burden: Research to Reality



Set up India's first worksite-based Sentinel Surveillance System for Cardiovascular Disease (CVD) and its risk factors across 10 major industrial sites. This pioneering initiative became a benchmark in workplace health programs and was recognized by the World Economic Forum and Institute of Medicine, Washington as a model for replication across India and other developing countries. Simultaneously, we established a thriving collaborating network across India (north, south, east and west) with capacity building in parallel.

**Covered 30,000+ employees and their families**



Co-Led the UMPIRE Trial in India, the first large study of the polypill concept in secondary prevention. This phase 3 randomized trial tested the Red Heart Pill, a fixed-dose combination of aspirin, a statin, and two blood pressure medicines in 2,000 high-risk patients across Europe and India.

Built on the worksite Sentinel Surveillance Study, conducted the landmark Indian Migrants Study in collaboration with the London School of Hygiene & Tropical Medicine, which revealed that within just a decade of migration, individuals acquired urban-level cardiovascular risk factors. The study also broke new ground by examining gene-environment interactions shaping cardiovascular risk in the Indian population.



Implemented the DISHA trial, an IEC-based lifestyle modification program delivered through Anganwadi Centres, to test the effectiveness of community health workers in reducing population-level blood pressure. The study also demonstrated the feasibility of integrating NCD risk reduction into community health programs, showing how trained workers can positively influence diet, tobacco and alcohol use, physical activity, and improve lipid and blood sugar profiles.





Coordinated the ADVANCE trial in India on behalf of the George Institute, Australia. It was one of the largest diabetes trials, which demonstrated that routine administration of Perindopril and Indapamide improves survival and reduces coronary and renal events, setting a new benchmark in diabetes and vascular disease management.



Implemented the mWELLCARE study in collaboration with London School of Hygiene & Tropical Medicine (LSHTM) and Public Health Foundation of India (PHFI) to develop an integrated mHealth system for managing diabetes, hypertension, and depression in India's primary care settings. The trial tested a smartphone-based application that enabled healthcare teams in public facilities to deliver better quality care, measuring its impact through improvements in blood pressure and blood glucose control.



Coordinated the landmark STICH Trial, an international study assessing whether Coronary Artery Bypass Grafting (CABG) improves survival compared to medical therapy alone, and if Surgical Ventricular Reconstruction (SVR) alongside CABG further enhances outcomes. The study found that SVR reduced heart size but did not improve survival, while CABG with medical therapy lowered the risk of sudden death and heart failure, with benefits emerging after two years.

Implemented the CARRS-Translation Trial in collaboration with Emory University, AIIMS, New Delhi & PHFI, a multi-site randomized study testing low-cost, scalable strategies to improve cardiovascular risk management. The trial evaluated multifactorial interventions to help patients achieve targets for blood sugar, blood pressure, and LDL, introducing a novel care model with low-cost care coordinators in secondary hospitals across South Asia.



Conducted a cohort-based cardiometabolic risk reduction surveillance (CARRS) study in collaboration with Emory University, AIIMS, New Delhi and Madras Diabetes Research Foundation in Chennai and Delhi, creating a model system to track disease and risk factors across South Asia while measuring incidence, morbidity, and mortality.





Launched the Precision CARRS (P-CARRS) study with multiple national & international partners to shift cardiovascular disease prevention from traditional care to precision medicine and early detection. Built on the CARRS Cohort, a state-of-the-art, population-based study of over 20,000 South Asians.



Steered the GeoHealth India hub program (Phase 1 and 2 - Geohealth HEALS) in collaboration with Harvard T.H. Chan School of Public Health to study the role of environmental exposures on chronic diseases across different life stages in India. Unique machine-based techniques for high-resolution exposure assessments of air pollutants (PM 2.5, NO<sub>2</sub>, O<sub>3</sub>) and temperature across multiple cities have generated critical evidence on the links between exposomes and health impacts.

Conducted the TOPSPIN study in collaboration with Imperial College London, the first randomized trial in South Asians to compare three dual anti-hypertensive pill combinations in patients with uncontrolled hypertension. The study showed that all three combinations were equally effective and safe in reducing blood pressure, offering clinicians an evidence-based roadmap to address the massive hypertension burden in India and across South Asia.



Initiated the Yoga-CaRe (Yoga-based Cardiac Rehabilitation) ICMR-funded Clinical Trial, one of the world's largest multi-center randomized studies of yoga-based cardiac rehabilitation. Designed to fill the gap in cardiac rehab programs in resource-limited settings like India, the trial developed and validated a comprehensive program combining yoga, healthy diet, and lifestyle change for patients with cardiovascular disease.





Launched the ICMR-funded CAR-RAHAT (Centre for Advanced Research for Rural Health Care Transformation) Smart Village Initiative to strengthen primary healthcare in rural India through digital innovation. The program integrates digital health solutions, builds capacity in medical colleges, trains health professionals, and partners with local communities.

Collaborated in the SHEFS (Sustainable and Healthy Food Systems) project with LSHTM to generate evidence for policies that deliver nutritious, sustainable, and equitable diets. Conducted food systems assessments, farmer and trader surveys, and photovoice workshops in Andhra Pradesh and Haryana, capturing both the structure of local food systems and community perspectives on how foods transform from farm to plate.



Partnered the STAR-NCD (Strengthening Ambulatory Care for Non-Communicable Diseases), an ICMR National Health Research Priority Project to improve outpatient care for hypertension, diabetes, COPD, and secondary prevention of coronary artery disease. Embedded within the National Programme for NCDs, the project targets critical gaps in coverage, retention, and quality of ambulatory care across India.



## Digital Health Frontiers: Reimagining Healthcare Access



Developed the Clinical Decision Support System (CDSS) in collaboration with AIIMS, New Delhi to assist healthcare professionals in public facilities with managing chronic diseases through simplified, evidence-based tools. Validated across multiple settings, the system supports screening, diagnosis, and management using standardized protocols and case studies, and has already improved care for over 200,000 patients, demonstrating a scalable model for enhancing NCD management nationwide.

Developed DigiSetu, an assisted telemedicine model through the BRIDGE Centre for Digital Health, to expand healthcare access for vulnerable populations. By training health workers to help patients overcome barriers of digital literacy, language, and access, DigiSetu has enabled over 60,000 consultations and touched over a 100,000 lives —demonstrating a scalable model for delivering quality, inclusive digital healthcare across India.



Collaboratively launched DIGI-CARE, an ICMR National Health Research Priority initiative, to strengthen digital technologies for diabetes and hypertension management within India's public healthcare system. This multi-institutional, multi-site implementation study aims to improve uptake and effective use of digital interventions under the National Programme for NCDs.



## Building Systems, Building People: Capacity Strengthening Programs

Under the GEOHealth India Program, CCDC leads efforts to build capacity in multidisciplinary environmental health research. So far, 32 short courses and workshops have been conducted across India (including in ICMR institutes), in collaboration with Harvard School of Public Health, training nearly 750 researchers across India.



Completed the Interdisciplinary Research Training in NCD Epidemiology and Prevention, in collaboration with Emory University, enhancing capacity across various disciplines and training junior faculty and postdoctoral fellows to lead independent research in chronic disease and implementation science.



Conducted the COALESCE program, strengthening capacity for chronic disease research and action in India and Ethiopia by training 12 postdoctoral researchers through a long-term program and 80 international public health and clinical practitioners through short-term courses in implementation science and leadership.



Conducted the Nutrition Epidemiology Course annually from 2010, with leading faculty from premier institutes, providing rigorous training in study design, data analysis, and evidence-based approaches. To date, more than 450 participants have been equipped to advance public health nutrition initiatives and influence national policy.



Launched specialist training programs in cardiology, endocrinology, and ECG interpretation, equipping DM/ DNB trainees and physicians with case-based learning and expert-led sessions. To date, over 30,000 physicians have been trained, fostering evidence-based practice and improving patient outcomes.

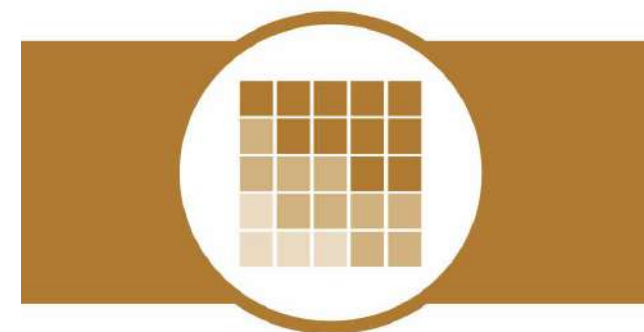
Developed the Cancer Research in India Digital Course to build skills in population, clinical, and basic science data management. So far, 80+ participants have been trained in cancer epidemiology, research ethics, registries, data linkages, and genomic and epigenomic analyses, strengthening India's cancer research capacity.



Collaborated with WHO SEARO to digitize the HEARTS technical package and developed an online course on risk-based CVD management. The module trains policymakers, program managers, and healthcare workers across ministries of health, especially in resource-limited settings, to strengthen primary care delivery for cardiovascular disease.



**Technical package for cardiovascular disease management in primary health care**



**Risk-based  
CVD management**





# Policy to Practice: Driving Innovation in Health Systems

CCDC has played a pivotal role in translating evidence into practice, both nationally and globally. Some key contributions include:

## Assisting development of National Programs:

Assisted the Government of India in **designing the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)**.

## Global Policy Engagement:

Contributed to the **World Bank's regional policy note** on NCDs.

**Knowledge Leadership:** Edited and contributed to leading publications, including special editions of *Current Science*, the **Indian Journal of Medical Research**, the **Disease Control Priorities**, 3rd edition, and the **Global Heart**.

**Innovations in Digital Health:** Co-developed the **Clinical Decision Support System (CDSS)** with AIIMS, adopted under **NP-NCD Operational Guidelines** and integrated into the **national digital health platform**.

**Strengthening Regional Capacity:** Supported **WHO-SEARO** in building the capacity of policymakers and program managers in **cardiovascular disease management**, and more recently curated and delivered the **Climate and Health Responders Course** for South and South-East Asia, engaging all SEARO countries and training nearly 2,000 participants to address the health impacts of climate change.

**Setting Standards:** Developed primary care and district hospital standards under the **India Public Health Standards (IPHS)** in 2008.




**Environmental Health leadership or impact:** Influenced national and global agendas by contributing to the **National Programme on Climate Change and Human Health**, and by partnering with **UNDP** and **ILO** on pioneering initiatives addressing **air pollution**, **sustainable procurement**, and **waste management** in the health sector.



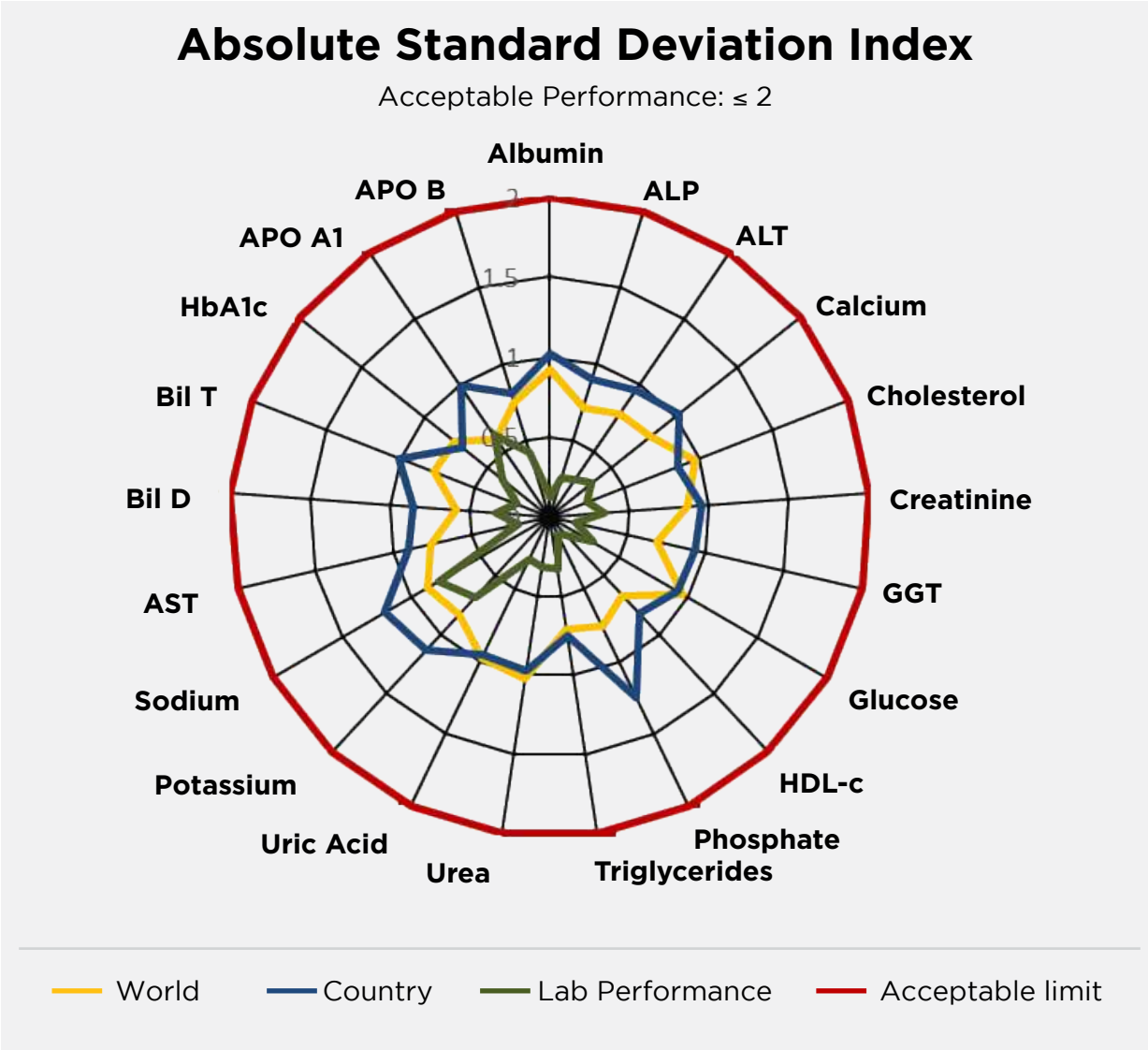
# The State-of-the-Art CCDC Laboratory

The CCDC Laboratory is a hub for advanced research, offering a wide spectrum of testing from clinical chemistry and extended lipid profiles to inflammatory, cardio-metabolic, and nutritional biomarkers.

The laboratory proudly holds **RIQAS** (Randox International Quality Assurance Scheme) and **UKNEQAS** (United Kingdom National Accreditation Service) certifications, one of the most respected international benchmarks for laboratory quality and competence. This recognition places our lab on par with the world's best, affirming our commitment to precision, reliability, and global standards in every test we conduct. More than a certification, it reflects our role as a high-performing hub of scientific integrity, where rigorous processes and trustworthy results strengthen research that is valued both nationally and internationally.

To date, it has conducted **more than**  
**9,00,000**  tests  
 across **15**  major studies,  
 analyzing over **100,000**  samples with precision and reliability.

The lab is supported by robust electronic data systems, standardized protocols for sample collection and storage, and a de-identification system to ensure accuracy and confidentiality.







## Biorepository

CCDC maintains a biorepository of over **7,50,000 aliquots from 60,000+ study participants, stored in 23 deep freezers and two liquid nitrogen tanks**, an impressive growth from just two freezers in 2011.

With innovative, low-cost solutions such as improved labelling systems, colour coding, and custom-designed storage boxes, the biorepository has evolved into a vital long-term research resource.



Sustaining these deep freezers has been an uphill task, with immense contributions from the lab staff and support from CCDC's admin and other teams.

A portrait of Dr. Ruby Gupta, an older woman with white hair and glasses, smiling. She is wearing an orange top.

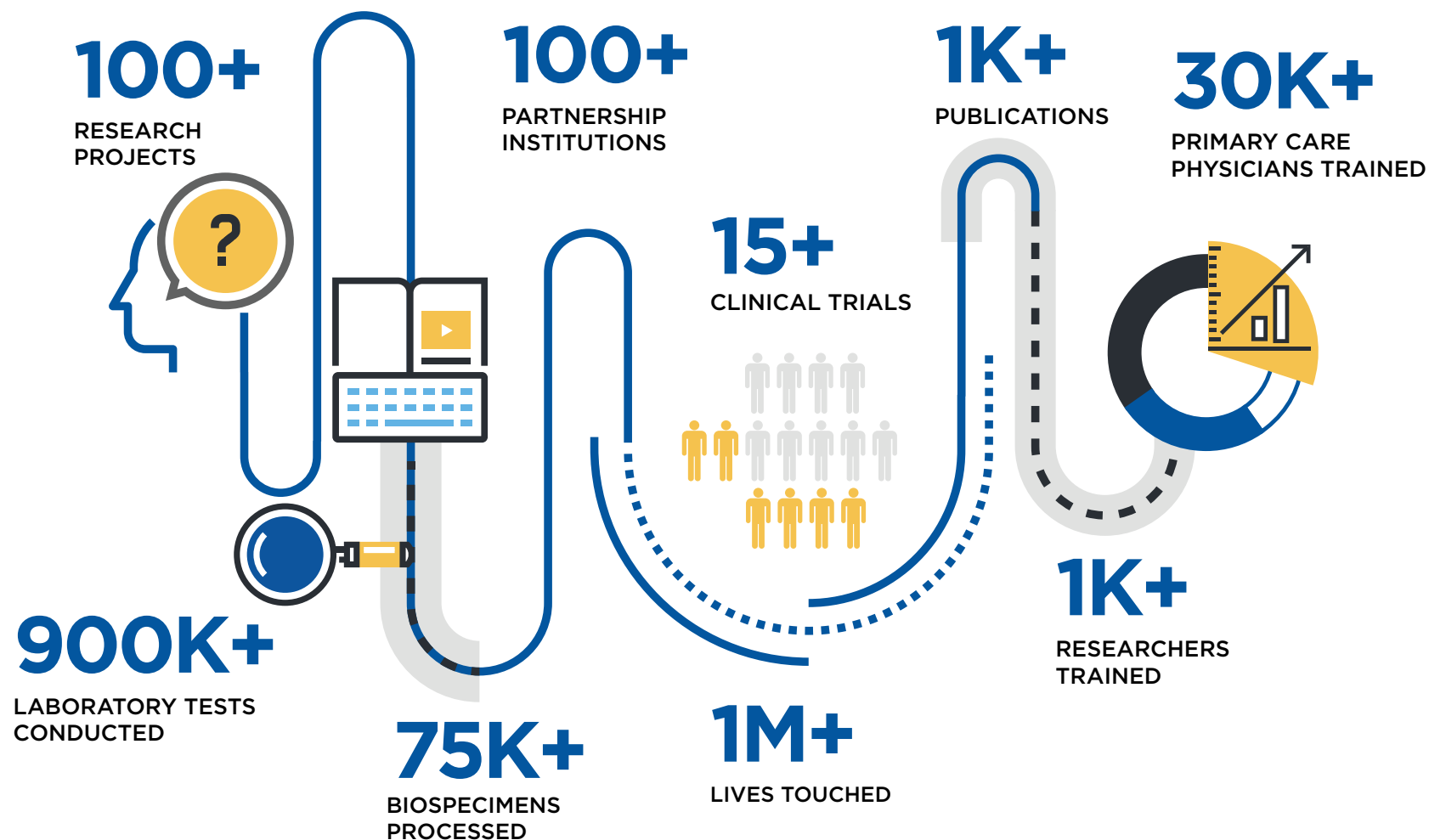
**Dr Ruby Gupta**  
Head, Bio-Lab & Senior Research Scientist (Biochemist), CCDC



# Measuring Change

## Transforming Lives & Healthcare

After more than two decades of pioneering research and training, the true measure of CCDC's work lies in the breadth of its impact, spanning numerous research projects and clinical trials, a strong body of publications, extensive training programs, and over a million lives touched.





## Chapter 4

# Partnering for Progress

## The Power of Collaboration in Public Health

Over 25 years, CCDC has thrived on **teamwork**, **multidisciplinary collaboration**, **global partnerships**, **impactful research**, and **mentorship**. By working with academic institutions, governments, and national and international partners, CCDC has translated diverse expertise into **scalable models**, **evidence generation**, and **policy impact**, shaping health systems in India and beyond.



## Our Collaborators Around the Nation



## Our Collaborators Around the World





“

Throughout its early years, CCDC was a hub of cross-disciplinary collaboration. The advisory board and scientific teams included experts in cardiology, endocrinology, epidemiology, nutrition, and neurology. This multidisciplinary approach became one of the organization's hallmarks, long before such models were widely adopted.

”



**Prof. K Srinath Reddy**  
Founder, CCDC

“

The next 25 years are about moving from diagnosis to solutions. CCDC must keep expanding its horizons across diseases, across disciplines, and across partnerships. That's how we will stay ahead of the curve and deliver impact where it matters.

”



**Prof. Nikhil Tandon**  
Professor and Head of Endocrinology,  
AIIMS New Delhi







“

Over the past 25 years, CCDC has been a pioneering force in research on non-communicable diseases, advancing our understanding of diabetes, hypertension, heart disease, and even certain cancers. Their work, from collaborative national and international studies to investigating the impact of air pollution, has made a lasting impact on science and healthcare in India.

”



**Dr V Mohan**

Chairman of the Madras Diabetes Research Foundation and  
Dr Mohan's Diabetes Speciality Centre

“

The essence of great collaboration is sharing common goals coupled with openness, personal chemistry, attention to mutual interest, and trust. The relationship between the Centre for Chronic Disease Control (CCDC) and the Emory Global Diabetes Research Center (EGDRC) exemplifies these principles.

”



**Prof. K M Venkat Narayan**

Executive Director, Emory Global Diabetes Research Center,  
Emory University



“

Congratulations to CCDC on 25 remarkable years. I have many fond memories of working alongside this incredible team. Being part of its journey, witnessing world-class research deeply rooted in India's reality, shaping policy, advancing science, and touching lives has been a true privilege. Every member of CCDC deserves praise for building a community that fosters growth, encourages collaboration, and leaves a lasting impact. I look forward to continuing this journey with CCDC in the years ahead.

”



**Prof. Vikram Patel**

Paul Farmer, Professor and Chair of the Department of Global Health and Social Medicine at Harvard Medical School, and Co-founder, Sangat, India

“

My time at CCDC remains one of the most enriching phases of my career. The commitment to high-quality research, the spirit of collaboration, and the visionary leadership created an environment where science thrived and people grew together. I continue to cherish the learnings and lifelong friendships obtained at CCDC. Congratulations to CCDC on 25 years of impactful work in public health and best wishes for the decades ahead.

”



**Dr Roopa Shivashankar**

Scientist, Indian Council of Medical Research (ICMR)





“

Partnering with CCDC on the P-CARRS program and other scientific initiatives over the past 15 years has been a privilege, fostering opportunities for both Emory University and myself. These collaborations have allowed us to merge global expertise and cutting-edge methodologies to address one of today's most urgent health challenges.

Together, we are building stronger, more personalized approaches to cardiovascular care, with the potential to create a transformative impact on public health worldwide.

”



**Prof. Mohammed Ali**

Faculty, Global Health and Vice Chair (Research), Department of Family and Preventive Medicine, Rollins School of Public Health, Emory University

“

Congratulations to CCDC on 25 incredible years. Your work has not only advanced science and health policy across India and beyond, but it has also shaped careers and touched lives, including my own. Thank you for guiding and inspiring so many along the way.

”



**Prof. Mark D Huffman**

Professorial Fellow, George Institute for Global Health, Professor of Public Health & Co-Director Global Health Center, Washington University School of Medicine



“

Warmest congratulations to Professor Prabhakaran and the entire CCDC team on 25 remarkable years. Your work—from world-leading research on air pollution and cardiac health, to strengthening community health systems, training the next generation of public health leaders, and hosting international training seminars in India—has not only advanced science but transformed lives. The collaborations you’ve built between scientists, health workers, policymakers, and communities, both nationally and globally, are a testament to your lasting impact. I’ve personally learned so much from your commitment and leadership, and I look forward to seeing your continued success in the years ahead.

”



**Prof. Kay-Tee Khaw**

Emeritus Professor of Clinical Gerontology, School of Clinical Medicine, University of Cambridge

“

Congratulations to CCDC on completing 25 years of impactful work, training countless professionals and establishing itself as one of India’s leading research groups. I wish Prabhakaran and CCDC every success as they move forward.

”



**Prof. Salim Yusuf**

Cardiologist, Epidemiologist and Distinguished University Professor, McMaster University

“

In 25 years to become not just a regional but a global centre of excellence is an enormous achievement. Sincere congratulations to all involved.

”



**Prof. Neil Poulter**

Professor of Preventive Cardiovascular Medicine, Imperial College, London

“

On this anniversary, I congratulate CCDC for its outstanding contributions to understanding and addressing non-communicable diseases in India. By combining rigorous research with policy relevance, CCDC has helped shape how we think about diabetes, heart disease, and other NCDs. Its work continues to guide a healthier future for our nation.

”



**Prof. Anurag Agrawal**

Dean, BioSciences and Health Research, Trivedi School of Biosciences, Ashoka University and Head, Koita Center for Digital Health at Ashoka

“

As CCDC marks 25 years, it strongly demonstrates that science anchored in equity, grounded in evidence and partnership, can create lasting health impact

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**Ms. Lakshmi Sethuraman**

Partner - Health Practice Area,  
Sattva Knowledge Institute,  
Bangalore

“

Over the last 25 years, CCDC has played a pioneering role in generating evidence and shaping strategies to address the growing burden of NCDs in India. Its work has not only advanced science but also influenced national policies and practices, ultimately improving the health and wellness of millions. It is a privilege to see CCDC continue to grow as a hub of knowledge, innovation, and impact.

”



**Prof. N K Arora**

Executive Director, The INCLEN Trust International



“

CCDC has been at the forefront of advancing research, training, and policy in cardiovascular health. The cardiology masterclass program is a shining example of how CCDC is building capacity and empowering the next generation of clinicians. Completing 25 years is not just a milestone but a testament to its sustained commitment to improving heart health in India and beyond.

”



**Prof. S C Manchanda**

Cardiologist & Senior Consultant,  
Sir Ganga Ram Hospital

“

Until recently, our focus was on understanding the many factors influencing chronic diseases and on strengthening health systems in India, aligned with the goals of sustainable development. But with the pandemic and shifts in the global public health landscape—where much of the progress in science has long relied on strong foundations in the West—the role of CCDC has become even more important— an exemplar built on strong collaboration and a network of multiple nodes.

”



**Prof. K VijayRaghavan**

Professor Emeritus, National Centre for  
Biological Sciences (NCBS), Tata Institute  
of Fundamental Research, Bengaluru





## Chapter 5

# The Road to India@100

## Charting the Future of Healthcare in a Developed India

As CCDC celebrates 25 years, it also looks ahead, with urgency and purpose. By 2047, when India turns 100, our health systems must be more equitable, innovative, and resilient.

The next chapter of public health will be shaped by:

**Precision Medicine:** Moving from one-size-fits-all to care tailored to genetics, lifestyle, and environment. CCDC's CARRS program has already laid the foundation with one of the region's largest and most comprehensive cohorts on cardiometabolic risks.

**AI and Big Data:** Harnessing technology to predict risks, improve care, and guide health workers through inclusive digital decision support systems.

**Building Evidence and Establishing Climate-Resilient Health Systems:** Through the GEOHealth program and health systems engagement, CCDC is generating actionable evidence on the health effects of air pollution and temperature extremes and establishing frameworks for India's response to climate change.

**Rural Health Transformation:** With CAR-RAHAT, a new ICMR-awarded initiative, CCDC is building scalable, tech-enabled, and equitable rural health models across five states.

**Bridging Innovation:** Linking startups, technology partners, and public health programs to translate science into practice.

**Youth Leadership:** Mentoring the next generation of researchers and students whose energy and ideas will shape India's health future.

### Building Partnerships and Networks

CCDC envisions a future where science, technology, and compassion come together to deliver health for all, paving the way for a healthier India@100.



“

India@100 offers a powerful vision. To make it real, we must ensure that every citizen – no matter their location or socio-economic standing – can live a long, healthy, and productive life, free from the burden of preventable diseases. As we move towards this goal, CCDC remains committed to imagining boldly and building responsibly—keeping health equity and scientific excellence at the centre of the journey.

**Prof. D Prabhakaran**  
Executive Director  
Centre for Chronic Disease Control (CCDC)



# Thank You

Our progress in tackling the growing burden of Non-Communicable Diseases has been possible only through the unwavering support of our partners, colleagues, and well-wishers.

We gratefully acknowledge every division of CCDC— from CVD Epidemiology, Clinical Trials, Implementation Science, Environmental and Digital Health, to our Data, IT, Human Resources, Administration, Laboratory and field teams. Each has played a vital role in turning ideas into impact.

To our employees, past and present, we extend heartfelt gratitude for your dedication and innovation. Your work has strengthened our mission and brought us closer to a future where quality healthcare is within everyone's reach.

Being recognized as a Centre of Excellence by the **Indian Council of Medical Research (ICMR)** and **World Health Organization (WHO) Collaborating Centre** is a testament to these collective efforts and inspires us to keep pushing boundaries in research, innovation, and community health.

*Together, we move forward, driving research, strengthening policies and programs and shaping a healthier tomorrow.*









## **Centre for Chronic Disease Control**

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