



Kushal, BANERJEE

Tell us a bit about your professional background

I've been in clinical practice for eleven years. Our practice is privately owned, self-reliant and treats patients for free for half of every working day. As a result, the clinic is quite busy, and we see an average of seven hundred patients a day. In addition to treating patients, my work involves supervision of staff, periodic outcome assessments, conducting research projects at the clinic and coordinating research with external institutions and recruiting and training doctors and staff. I also present papers at conferences and contribute to the news media.

Why do you want to become a member of Cochrane's Governing Board?

I hold Cochrane in great respect and regard it as the gold standard in evidence. Continuous interactions with patients and doctors 'on the ground' have highlighted, for me, weaknesses in the availability and use of evidence and issues around this. This made me want to work towards resolving, at least, some of these issues. I can think of no better organization than Cochrane for this. I believe that my combination of experience in governance of a charity, clinical work, evidence-based medicine training, and experience, without a deep association with Cochrane, provides for a unique 'outsiders' perspective which can bring substantial value to the Board.

What are Cochrane's key opportunities and challenges and what can the Board do to help address them?

In my opinion, there are two important but broad areas that need focus: simplification of evidence and increasing availability and use. These also align well with Cochrane's 'Strategy 2020'.

Opportunities:

A central government-run, public-private partnership nationwide health programme is being rolled out in India. For the first time, there may be a coherent overarching strategy for health. Cochrane should consider partnerships here and drive high-quality evidence-based decision making for most of the country.

Penetration of internet coverage has now extended to rural and remote parts of India and other countries. **The availability of 'data light' versions of the library will be very important. In addition, reliable translations in a larger number of languages may contribute to increased usage.**

Challenges:

Both State sponsored and private healthcare in countries like India have overburdened doctors and personnel. Encouraging the use of, and participation in Cochrane in these settings is important and difficult. The Board may encourage more outreach activities to communicate the benefits to resource-limited or revenue-oriented organizations.