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Nomination of Dr. Premashish Kar, for the SUN PHARMA SCIENCE FOUNDATION RESEARCH AWARDS 2023

It gives me pleasure to nominate Dr Premashish Kar, former Director Professor medicine, MAMC and former Dean Faculty of Medical Sciences, University of Delhi for the Sun Pharma Science Foundation Research Awards: Medical Sciences - CLINICAL RESEARCH 2023. Dr Kar has been actively involved in research activities in the field of liver diseases, particularly, Viral hepatitis, which continues to a major public health problem in India. In this field, he has published more than 150 research publications (citations-6921, hi-index 46 and i10 index 147) in reputed national and International journals which has contributed to the advancement of knowledge in the field of viral hepatitis. He has made significant contributions in the field of molecular epidemiology and genotyping of hepatotropic viruses (A TO E), which has immense clinical implications in the India context. He has generated baseline information for the various infectious hepatotropic viruses (A,B,C,D), including the newer hepatotropic viruses (HEP G,SEN V and TT viruses) and their defined contributions as etiological factor for the of viral hepatitis in India. His work in the field of hepatitis E during pregnancy has led to better understanding of the various risk factors contributing to the severity of the disease and mortality. He showed for the first time that host cell signalling through pro inflammatory transcription factor, NF-kB, plays a pivotal role in acute liver failure in pregnant women. In another landmark publication, he was able to demonstrate reduced expression of progesterone receptor (PR), progesterone inducing blocking factors (PIBF), high viral loads and higher IL 12/IL 10 ratio, predicted poor outcome in HEV infection during pregnancy. He has shown for the first time that HEV replicates in the placenta, an extra hepatic site during pregnancy, which contributes to high mortality in Acute liver failure during pregnancy. He also reported that HEV viral load was significantly higher in pregnant women during Acute liver failure compared to non pregnant women and that high HEV viral load and raised estrogen, progesterone and B-HCG levels could be the risk factors for the severity. Synonym substitutions along with a novel mutations P2595 in capsid gene which has been shown to be associated with poor outcome of HEV infection during pregnancy. It has been also reported recently that high estrogen levels is a significant predictor for the pre-term delivery and maternal mortality and ESR2BETA level is a significant predictor for maternal mortality in pregnant women infected with HEV.

I am attaching a list of his significant published papers that have contributed to the advancement of knowledge in his field of Liver Disease during Pregnancy.

S.NO	PUBLICATIONS	IMPACT
		FACTOR
1	Bose PD, Das BC, Hazam RK, Kumar A, Medhi S, Kar P. Evidence	5.14
	of extrahepatic replication of hepatitis E virus in human placenta.	
2	Journal of General Virology 2014 Jun 1:95(6):1266-71.	(77
2	Bose PD, Das BC, Kumar A, Gondal R, Kumar D, Kar P. High viral	6.77
	load and deregulation of the progesterone receptor signaling pathway:	
	association with hepatitis E-related poor pregnancy outcome. Journal of hepatology 2011 Jun 1:54(6):1107-13	
3	Kar P, Jilani N, Husain SA, Pasha ST, Anand R, Rai A, Das BC. Does	33.88
3	hepatitis E viral load and genotypes influence the final outcome of	33.88
	acute liver failure during pregnancy?. Official journal of the American	
	College of Gastroenterology) ACG. 2008 Oct 1.103(10):2495-501.	
4	Devi SG, Kumar A, Kar P, Husain SA, Sharma S. Association of	40.25
	pregnancy outcome with cytokine gene polymorphisms in HEV	
	infection during pregnancy. Journal of Medical Virology. 2014	
	Aug;86(8):1366-76.	
5	Singh S, Daga MK, Kumar A, Husain SA, Kar P. Role of oestrogen	8.75
	and its receptors in HEV-associated feto-maternal outcomes. Liver	
	International, 2019 Apr;39(4):633-9.	
6	Borkakoti J. Ahmed G, Hussain SA, Rai A, Kar P. Novel molecular	2.68
	alterations in the ORF 2 capsid gene of hepatitis E virus in patients	
	with acute liver failure in North India. Archives of virology. 2014	
	Dec;159(12):3391-4.	
7	Devi SG, Kumar A, Kar P, Husain SA, Sharma S. Association of	40.25
	pregnancy outcome with cytokine gene polymorphisms in HEV	
	infection during pregnancy. Journal of Medical Virology. 2014	
8	Aug:86(8):1366-76 Michael S. Bonkokoti I. Kuman S. Kan D. Bala of HEV antigan	40.25
0	Mishra S, Borkakoti J, Kumar S, Kar P. Role of HEV antigen detection in HEV-related acute viral hepatitis and acute liver failure.	40.23
	Journal of Medical Virology. 2016 Dec;88(12):2179-85.	
9	Borkakoti J, Ahmed G, Ral A, Kar P. Report of novel H105R, D29N,	14.48
	V27A mutations in the methyltransferase region of the HEV genome	11.10
	in patients with acute liver failure. Journal of Clinical Virology. 2017	
	Jun 1:91:1-4.	
10	Das K, Kar P. Gupta RK, Das BC. Role of transfusion-transmitted	6.77
	virus in acute viral hepatitis and fulminant hepatic failure of unknown	
	etiology. J Gastroenterol Hepatol [Internet]. 2004)	
11	Jilani, Nishat et al. "Hepatitis E virus infection and fulminant hepatic	6.77
	failure during pregnancy. Journal of gastroenterology and hepatology	
	vol. 22,5 (2007): 676-82.doi:10.1111/j.1440-1746.2007.04913.x	
12	Prusty BK, Hedau S, Singh A, Kar P, Das BC. Selective suppression	6.35
	of NF-kBp65 in hepatitis virus-infected pregnant women manifesting	
	severe liver damage and high mortality. Molecular medicine. 2007	
	Sep:13(9):518-26.	

DR KAR'S excellence in academic contributions in the field of Viral Hepatitis specifically during Pregnancy deserves to be considered for the prestigious SUN PHARMA RESEARCH AWARD: MEDICAL SCIENCE - Clinical Research Award2023.

Prof (Dr) Bhudev C Das