

CHRISTIAN MEDICAL COLLEGE VELLORE

**DEPARTMENT OF MEDICINE 4
(LIFESTYLE MEDICINE)**

&

DISTANCE EDUCATION UNIT



**POST GRADUATE DIPLOMA IN
LIFESTYLE MEDICINE
(PGDLM)**

PROSPECTUS 2026-27

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2026-27



Post Graduate Diploma in Lifestyle Medicine (PGDLM)

One-Year Blended Learning Distance Education Course

For upskilling MBBS/MD/MS/DM/MCH Doctors and Allied Health Professionals

IMPORTANT INFORMATION

The purpose of this course is to impart knowledge and provide skills upgradation in Lifestyle Medicine for doctors and associates at the primary, secondary and tertiary level. This is not equivalent to any postgraduate residential courses in internal medicine or other specialty such as MD / DNB. Currently, this course is NOT affiliated to any university nor recognized by the MCI / NMC.

The PGDLM certificate cannot be used as a post-nominal designation.

**ADMISSION TO THIS COURSE IS SUBJECT TO APPLICABLE
REGULATIONS BY THE CMC ADMINISTRATION**

Admission to CMC VELLORE is through the process described in this prospectus. No fee or donation, or any other payments, are accepted in lieu of admission other than what has been prescribed in this prospectus.

Therefore, the General Public is cautioned not to be lured by any person/persons offering admission to any of the courses conducted by CMC. Should any prospective candidate be approached by any person/persons, this may immediately be reported to the law enforcement agencies for suitable action and also brought to the notice of the College at the following address:

Distance Education Unit,
Christian Medical College,
No. 95, Balanilayam, Sanjeevipuram, Bagayam,
Vellore - 632 002.

Phone No: 04162285590
Mobile No: +91 9498749931
Email: pgdlm@cmcdistedu.org

WEBSITE

<http://courses.cmcdistedu.org/#pgdlm>

Please note

We do not admit students through agents or agencies. The college will not be responsible for any dealings with such a person(s).

1. PREAMBLE

The Christian Medical College (CMC) was established to address critical health gaps by providing medical care to women with limited access to healthcare. Staying true to this legacy, CMC continues to play a vital role in bridging health disparities across the country—an ongoing commitment reflected in its mission and vision.

India is at the epicenter of a metabolic health crisis. Over the last three decades, the proportion of deaths attributed to non-communicable diseases (NCDs) has nearly doubled, surging from 34% in 1990 to an estimated 71% in recent years. This ‘silent pandemic’ is uniquely aggressive in low- and middle-income countries, which now account for 86% of the 17 million premature deaths occurring annually between the ages of 30 and 70.

Current national data reveal an alarming landscape of risk: the prevalence of dysglycemia (diabetes and prediabetes) stands at 27.1% nationally, reaching staggering peaks of 48% in Tamil Nadu and 63% in Puducherry. Furthermore, 53% of Indian adults meet the AHA criteria for Stage 1 & 2 hypertension, 81% suffer from dyslipidemia, and an additional 40% from abdominal obesity. Driven by the four primary drivers identified by the Global Burden of Disease study - unhealthy diet, tobacco use, physical inactivity, and obesity—these conditions demand a shift from symptomatic management to evidence-based lifestyle intervention.

NCDs are typically lifelong conditions that contribute substantially to the nation’s morbidity, mortality, and economic burden. The global strategy for addressing non-communicable diseases (NCDs) currently emphasizes early detection and timely treatment to prevent complications. However, lifestyle modification offers far-reaching benefits—not only in improving disease control but also in reversing disease progression and preventing complications—while remaining cost-effective for both individuals and governments. Despite its importance, adherence remains a challenge: medication compliance ranges from 42% to 51%, while adherence to lifestyle changes varies between 32.9% and 62.8%.

The emerging specialty of lifestyle medicine offers a vital response to the growing crisis of non-communicable diseases (NCDs). Rooted in evidence-based practice, lifestyle medicine is a discipline within modern medicine that addresses the root causes of disease through therapeutic lifestyle interventions. These include a whole-food, plant-predominant diet, regular physical activity, restorative sleep, effective stress management, avoidance of risky substances, and fostering positive social connections as foundational modalities.

Formally introduced by the American College of Lifestyle Medicine in 2004, the field has since gained global momentum. Today, more than 30 countries have established national lifestyle medicine organizations under the umbrella of the **Lifestyle Medicine Global Alliance**, including the **Indian Society of Lifestyle Medicine**. In support of standardizing this specialty, international certification pathways have also been developed.

The **Government of India (GOI)** has echoed this shift by placing health as a national priority. Initiatives such as *Eat Right India*, the *School Health Program*, and the transformation of primary health centers into *Health and Wellness Centers (HWCs)* reflect its commitment to a *Swasth Bharat (Healthy India)*.

In alignment with these developments, **Medicine Unit 4 at CMC Vellore** initiated a Lifestyle Medicine team in February 2013, in collaboration with the departments of Dietary Services, Physiotherapy, Mental Health, Social Work, Chaplaincy, and other clinical specialties. The team began with a dedicated **Wellness Clinic**, followed by a 5-day tobacco cessation program with the Department of Dentistry, a monthly **Breast Cancer Survivorship Program** with Radiation Oncology, Quarterly health camps and webinars for the public and an **8-week lifestyle training program** for postgraduate trainees and interns.

The department also supervises a growing number of research projects in Lifestyle Medicine involving undergraduate students, interns, postgraduates, and faculty members.

Presently, **four faculty members** are Diplomates of the **International Board of Lifestyle Medicine (IBLM)**, and three others have completed the **Postgraduate Diploma in Lifestyle Medicine (PGDLM)**.

A needs assessment conducted among physicians enrolled in a CMC Distance Education course found that **49 out of 64 respondents** expressed interest in joining a PG Diploma in Lifestyle Medicine—highlighting a significant demand for structured training in this field.

This course is well aligned with **CMC’s vision and mission**. The PGDLM aims to equip doctors and healthcare associates to deliver clinical services, engage in teaching, and initiate research in Lifestyle Medicine. There is a pressing need to develop specialists whose clinical practice is rooted in Lifestyle Medicine, as well as to empower physicians and surgeons from all disciplines to integrate lifestyle-based approaches into their routine care.

The proposed PGDLM seeks to meet this need.

A unique feature of this course is that we seek to equip teams of a doctor and healthcare professionals who can together meet the needs of the community they seek to serve.

2. ELIGIBILITY CRITERIA

This course is open to Indian citizens residing in India and Non-Resident Indians (NRIs)

- a. **Doctor:** A minimum of an MBBS degree or an equivalent degree in allopathic medicine.
 - b. **Associate:** Allied health professional (Nurse, Dietitian, Physiotherapist, Occupational therapist, or Clinical Psychologist).
1. All candidates must possess a valid MBBS degree certificate or equivalent. (Provisional MBBS certificates shall not be considered/accepted). Candidates possessing higher degrees, diplomas, or fellowships may also apply.
 2. All candidates must possess a valid MCI / NMC / State Medical Council registration. NRI candidates must possess a valid registration in the country of work.
 3. The MBBS doctor is the primary applicant for this course. Application for this course must be made as a team—a doctor together with an Allied Health Professional (nurse, dietitian, physiotherapist, occupational therapist, or clinical psychologist) who will be referred to as “Lifestyle Medicine Educator.” Neither the MBBS doctor nor the “Lifestyle Medicine Educator” can apply independently for this course.

4. In case the MBBS Doctor or the “Lifestyle Medicine Educator” has previously enrolled for any of the other distance courses run by the Distance Education Unit, CMC Vellore, it is mandatory that the candidate has fulfilled all requirements of the previously enrolled course before applying for PGDLM. A candidate cannot be enrolled simultaneously in more than one course run by the Distance Education Unit, CMC Vellore.

Applicants, please note that the above criteria are mandatory for admission to the course.

3. **MAXIMUM INTAKE OF STUDENTS ANNUALLY**

Total number of seats for students - 60 (i.e., 30 pairs - Doctors: 30 and Associates: 30)

4. **COURSE DURATION: One Year**

This is a one-year blended learning distance education course that combines self-paced self-learning with two in-person contact sessions.

5. **COURSE OBJECTIVES**

To equip the lifestyle team (physician and associate) with the...

1. Evidence-based knowledge regarding a healthy lifestyle.
2. Skills in behaviour change, culinary arts, physical fitness, disease reversal, and community wellness.
3. Team-based approach in providing holistic health care.
4. Skills in assessment, intervention, and monitoring.

Knowledge and skills to be acquired by the student on completion of the course

A. Contents of the course

1. Introduction to Lifestyle Medicine
2. Behavioral change
3. Nutrition Concepts
4. Nutritional and lifestyle assessment, prescription, and monitoring
5. Reading food labels
6. Physical activity & exercise
7. Mental and emotional wellness
8. Social connectedness and wellness
9. Spiritual wellness
10. Digital health and lifestyle medicine
11. Community-based wellness programs
12. Disease-based lifestyle practice
13. Research Methods in Lifestyle Medicine

B. Skills

1. To be able to use an evidence-based lifestyle approach as the first level or foundation of care for treating patients with chronic disease.
2. To involve a holistic approach to patient care, focusing on lifestyle factors that can impact health outcomes and using evidence-based interventions to prevent and manage chronic diseases.

3. To be able to conduct a comprehensive assessment of their patients and identify areas for improvement in their lifestyle by addressing the physical, emotional, and social factors that contribute to overall health and well-being.
4. To be able to counsel patients on behavior change techniques such as goal setting, motivational interviewing, self-monitoring, and problem solving.
5. To be able to prescribe personalized lifestyle interventions, including diet, physical activity, stress management, and sleep tailored to their patients' unique needs, preferences, and goals.
6. To be able to help patients identify and overcome barriers to change and provide support and guidance throughout the change process.
7. To be able to provide education and support to clients to help them make sustainable lifestyle changes.
8. To be able to monitor and follow up on clients' progress and provide feedback on their progress towards achieving their goals. Various tools may be used, such as questionnaires, tracking logs, or wearable devices, to monitor progress and identify areas for improvement.
9. To be able to begin advocating for a health-promoting lifestyle in the community.

C. Establishment of a lifestyle medicine care team

One of the core objectives of this course is to create lifestyle medicine practice teams. It is for this reason that every doctor has been asked to enroll along with an allied health professional. To achieve the goal of creating lifestyle medicine practice teams, the course has been specifically designed to foster team building. Course materials have been appropriately designed to meet the learning needs of both the doctors and the Lifestyle Medicine Educators.

Lifestyle modification is very important in the prevention, management, and at times reversal of the lifestyle-related disease process. These are most effectively administered by a team whose members are appropriately trained and are role models. Therefore, an integrated management plan that involves a team, initially made up of a doctor and an associate, will greatly benefit patients and communities who are seeking to take more control of their health and reduce their chronic disease burden.

6. SELECTION PROCESS

- A minimum of 40% of the seats in the course will be reserved for women.
- There is no Entrance Test.
- The selection process is based on the above guidelines.

Weightage in selection will be given to those

- In practice for over 5 years
- In Christian Mission Hospitals, rural practice, medical colleges, and those working in areas of need (*See Annexure-I*)
- With a passion for setting up lifestyle medicine services in their work areas.

Note: The final selection of all qualified candidates is at the discretion of the Selection Committee. Any attempt by the candidate or their relatives to influence the admission process can lead to the disqualification of the candidate.

7. COURSE COMPONENTS

- Self-learning modules (SLM) - self-paced, online, and interactive
- Online assignments (Workbook activities and quizzes)
- Weekly practical exercise and culinary activities
- Discussion forums
- Monthly online sessions (presentations, practical skills, and Q&A)
- Two ‘Contact Programs’ - periods of hands-on, intensive, interactive, and practical onsite sessions using flipped classroom methodology
- Project Work

7.1 Self-paced self-learning components

The course content is designed as interactive online self-learning modules. These are released weekly to facilitate self-paced learning, except during the contact program periods. There will be workbook activities (WBA) and MCQ-format quizzes released with each module to test learning.

Self-learning modules will cover the following:

MODULE	TOPIC	SUB -TOPICS
1.	Lifestyle Medicine - Introduction	<ol style="list-style-type: none"> 1. Importance of lifestyle medicine 2. Epidemiology of lifestyle medicine 3. Common pathophysiology of lifestyle diseases 4. Role model & advocate of the practitioner
2.	Behavior Change	<ol style="list-style-type: none"> 1. Definition & theoretical background 2. Preparedness for behavior change 3. Techniques of behavior change 4. Sustaining behavior change
3.	Nutrition -1	<ol style="list-style-type: none"> 1. Nutritional science 2. Macronutrients - Carbohydrates 3. Macronutrients - Proteins 4. Macronutrients - Fats
4.	Nutrition -2	<ol style="list-style-type: none"> 1. Micronutrients – Vitamins & Minerals 2. Phytonutrients 3. Dietary fiber 4. Water
5.	Nutrition – 3	<ol style="list-style-type: none"> 1. Nutritional and lifestyle assessment 2. Nutritional and lifestyle prescription 3. Nutritional and lifestyle monitoring 4. Nutrition Education
6.	Physical Activity	<ol style="list-style-type: none"> 1. Introduction and definitions 2. Assessment and screening

		<ol style="list-style-type: none"> 3. Prescription and guidelines 4. Counseling, monitoring & setting up a gym
7.	Mental and Emotional Wellness	<ol style="list-style-type: none"> 1. Sleep - in health & disease 2. Addictions - types, mechanism & management 3. Positive psychology and resilience 4. Counseling and coaching
8.	Social Connectedness	<ol style="list-style-type: none"> 1. Introduction to social wellness 2. Workplace wellness 3. Family wellness 4. Group dynamics
9.	Spiritual Wellness	<ol style="list-style-type: none"> 1. Introduction and overview 2. Physician as a spiritual caregiver 3. Spiritual distress and assessment 4. Spiritual care
10.	Digital Health & Community-Based Program	<ol style="list-style-type: none"> 1. Introduction and scope 2. Digital health assessment & management 3. Digital health & its role in health 4. Community-based programs
11.	Disease-Based Lifestyle Approach	<ol style="list-style-type: none"> 1. Cardiovascular diseases 2. Metabolic diseases 3. Kidney & Neurological diseases 4. Inflammatory & Malignant diseases
12.	Lifestyle research and publications	<ol style="list-style-type: none"> 1. Introduction and study design 2. Measure of disease frequency and risk 3. Interpreting study results 4. Introduction to systematic review

7.2 Interactive sessions

There will be two onsite contact programs, which are described below.

Onsite Contact Programs

The contact programs form a very important part of the course. Candidates will be required to attend two compulsory contact programs during the course period. These are full-day sessions that use the flipped classroom methodology. The candidates are expected to arrange their travel, food, and accommodation during the contact programs at their own cost.

Contact session 1	1 week	Contact session 2	1 week
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The first contact program will take place after completing the first few online modules. The second contact program will happen towards the end of the course. The teaching team employs a wide range of teaching methods, including demonstrations, interactive discussions, drama, role-plays, debates, quizzes, and team-based learning strategies. The students will also have opportunities to interact with the course faculty, who will share their experiences in practicing lifestyle medicine across various contexts.

Note: 100% attendance by both team members in the contact programs is mandatory for course completion.

List of Skills taught during the contact programs:

Clinical skills

1)	Wholistic history taking in patients with lifestyle diseases (NCDs)
2)	Motivational interviewing
3)	Communication skills
4)	Coaching skills
5)	Physical assessment—anthropometric
6)	Behavior change techniques
7)	Culinary skills
8)	Physical exercise
9)	Community and Health Camps Education
10)	Digital health applications

8. ASSESSMENTS

The assessments are both internal and final. These assessments are essential for course completion. Both doctors and associates are required to complete these assessments.

8.1 Internal Assessments:

1. **Assignments:** Each online module includes workbook activities and MCQ quizzes. The workbook is designed to demonstrate understanding and application of concepts presented in each unit that can be applied personally and to patients. These assignments are to be submitted periodically prior to the due dates. Exercise, culinary, and practical skills activities will be assessed and graded, and the scores will be incorporated into the internal assessment.
2. **Team dynamics and participation** - Each team will be assessed based on its active participation in various course components.
3. **Review Tests** during the first Contact Program.

8.2 Final Assessments:

1. **Project work:** The team of the doctor and associate is required to complete a project together in order to be eligible to graduate. The project work is designed to help the student team apply their learning to real-world practical contexts that they will have to work together on.
2. **Final assessment:** This includes both a theoretical and a practical component and will be conducted at the end of the course period.

9. CRITERIA FOR CERTIFICATION

Each candidate should fulfill the following criteria for the successful completion of the course. The criteria to pass in each component are as follows:

50% IN INTERNAL ASSESSMENT	100% ATTENDANCE DURING Contact Programs	50% IN PROJECT WORK	50% IN FINAL ASSESSMENT (excluding project)
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Both the doctor and the associate should pass in order for them to be certified. The doctor will be awarded a Post Graduate Diploma in Lifestyle Medicine, and the associates will be awarded a certificate as a Lifestyle Medicine Educator.

10. ALUMNI ENGAGEMENT

Student teams who graduate will have the opportunity to become part of the PGDLM alumni community with access to the modules and various opportunities to engage with the teaching team and other alumni.

11. COURSE FEES

Outlined below are the fees for the single application and course for both the doctor and associate combined.

S.No.	Description	Indian (INR)*	NRI (USD)**
1.	Application fees	Rs. 1,000	USD 60
2.	Course Fees		
	a. Study Material Cost (online material, videos, Contact program materials)	Rs. 45,000	USD 1300
	b. Tuition fees (Content delivery and training)	Rs. 30,000	USD 850
	c. Administrative cost	Rs. 15,000	USD 450
	Total Course Fees	Rs. 90,000	USD 2600

***INR is Indian National Rupee**

***USD is United States of America Dollars**

***NRI - Non-resident Indian**

Please note:

- Application and course fees, once paid, will not be refunded or transferred to any other candidate, for any reason.
- The currency exchange rate (if any) has to be borne by the students.

- Candidates applying under the Indian category shall be Indian citizens residing and working in India.
- Candidates located outside India need to note that the course fees prescribed do not include any possible customs duty levied in their country. This has to be borne by the candidate.
- The course fees and application fees exclude any bank transfer charges or exchange charges (if any). Those charges shall be borne by the candidates at their end.
- **Convocation Fee: A separate convocation fee is to be paid after the successful completion of all course components to receive the course Certificate.**

Scholarships: Limited scholarships are available for those who need financial assistance. Further information can be obtained by sending an email to pgdlm@cmcdistedu.org

12. SUBMISSION OF APPLICATION

Online Application Process

Applications for the PGDLM course are available online on the admissions webpage. The application has to be submitted with a **non-refundable application fee**.

To apply, click on the link <https://courses.cmcdistedu.org> and ensure that all fields are filled completely.

The following are required to be uploaded along with the application form:

1. Soft Copy of Recent Photograph

- The photograph must be in colour and a plain background is recommended.
- Image should be in JPG, JPEG, or PNG format with specifications - width 3.5 x 4.5 cm and less than 250 KB.

2. Soft Copy of Certificates

Scanned copy of the certificates that are to be uploaded includes the following:

- MBBS or equivalent degree certificate
- MCI or State Medical Council Registration Certificate
- MCI Screening test certificate (if the candidate has completed MBBS abroad)
- Scan the certificates using a scanner at 200 pixels per inch (dpi).
- Ensure that the PDF file size is between 50 KB and 500 KB.
- **Only PDF files will be accepted.**

Mode of Payment

Online payment: Use a credit card/debit card / net banking / UPI

When using a credit/debit card, if the transaction is not successful, but the amount is debited from your account, please wait for two working days. The transaction is likely to be completed during this period. **If the transaction is not complete within this period, please contact us at forms@cmcdistedu.org**

Payment mode for NRI: The payment can be made through the wire transfer mode. After submission of the application form, you will be redirected to the page where you can download

the wire transfer documents. The currency exchange rate shall be the market rate as of the date of the payment

FOR ANY CLARIFICATIONS, PLEASE CONTACT THE DISTANCE EDUCATION UNIT OFFICE.

Email: pgdlm@cmcdistedu.org

N.B.: THE INFORMATION PROVIDED ON THE APPLICATION FORM WILL BE TAKEN AS FINAL. NO CHANGES WILL BE PERMITTED.

ANNEXURE I

a. Definition of Mission Hospitals:

1. Hospitals under the Sponsoring bodies and churches of the CMC Vellore Council
2. Hospitals under Christian Organizations/institutions not mentioned in Annexure I
3. Hospitals under Catholic Organizations/institutions

b. Definition of “Areas of need”:

Category Sub-type	Description of the area of need
1A	Doctors presently working/have worked in these specified states: Arunachal Pradesh, Assam, Meghalaya, Manipur, Mizoram, Nagaland, Sikkim, Tripura, Odisha, Andaman & Nicobar Islands, Uttar Pradesh, Uttarakhand, Madhya Pradesh, Chhattisgarh, Bihar, Jharkhand, Jammu & Kashmir, Ladakh, Himachal Pradesh, Rajasthan, Lakshadweep
1B	Doctors presently working/have worked in Government / Quasi Government (including Armed Forces, etc.)
1C	Doctors presently working/have worked in Registered NGO hospitals (includes NGOs working with need-based health spheres such as HIV home care, Palliative care, Geriatrics, Rehabilitative care, Mental health, etc., or involved in tribal/rural work/work in slums)

ANNEXURE - II

Letter from the head of the hospital to be provided as per the format given below:

Format of Certification to be filled by the Head of the Hospital / Institution for work in Mission Hospital / Areas of need (to be issued on the Hospital / Institution letterhead)

This is to certify that _____, son/daughter of _____
has worked / is working in this hospital/institution from _____ to
_____.

Name

Signature

One paragraph about the hospital, its vision, mission, infrastructure, and details of the type of work done by the hospital to be included

Feedback from some of our Previous batch of PGDLM students

This course has equipped me with the knowledge and tools to address the root causes of chronic diseases through evidence-based lifestyle interventions. By integrating nutrition, physical activity, stress management, sleep hygiene, social & spiritual health into my patient care, I have seen remarkable improvements in their overall health and well-being. This holistic approach not only enhances patient outcomes but also fosters a more meaningful and rewarding practice for me as a healthcare provider.

Dr. Pooja Manoj, 2023 Batch, Kerala

This was a course with the best learning and teaching team that I could have dreamt of. Hats off to the dedication, passion, humility, and love of each faculty involved. It covered science in addition to the skill-based and fun-based, including culinary medicine and physical activity. It has given me a sense of purpose and made me a kinder person and more patient.

Dr. Varsha Dixit Shah, 2023 Batch, Gujarat

Integrating lifestyle medicine into my practice has transformed my approach to healthcare. With a focus on prevention, patient empowerment, and whole-person care, I now help patients make sustainable lifestyle changes that improve their health outcomes. This shift reduces healthcare costs and fosters a more collaborative relationship with patients. Additionally, applying these principles has enhanced my own well-being as a practitioner, helping me manage stress and avoid burnout."

Dr. I Srikanth, 2023 Batch, Pondicherry

PGDLM opened a new world to me. My approach to advocating in medicine is more scientific now. I am so fortunate to be doing this course. It is by God's grace that I completed the course. I am probably the oldest student of the first batch of PGDLM. God bless everyone.

Dr.Eileen Lalrinpuii, 2023 Batch, Mizoram

Lifestyle Medicine has transformed my life by promoting mindful eating, regular exercise, adequate sleep, and stress management. It has improved my energy, focus, and emotional balance. I now approach health holistically and guide others toward prevention and wellness. It has empowered me to live intentionally and inspire healthier lifestyles.

Ms. Angeline Jessy S, 2024 Batch, Karnataka

The Lifestyle Medicine course has profoundly transformed my own lifestyle, making it significantly healthier and more active. It has helped me recognize how small, consistent changes in daily life can lead to remarkable improvements in the health and well-being of both patients and ourselves.

Dr. Susanna John, 2024 Batch, Kerala

The journey of learning lifestyle medicine at CMC was an extremely enriching experience. The faculty members literally walked the talk! We were made to practice what we would recommend to patients which thoroughly made me understand & experience the difficulties the clients would face. The exercise session, spiritual session & culinary activities each session was unique & I thoroughly enjoyed it. Also I have made so many lovely memories & have built such positive relationships with lovely people (colleagues & faculty members) across all walks of life, which has been overwhelming. Feeling grateful for having been able to pursue this course at CMC.

Dr. Rashmi Rithusha V, 2024 Batch, Tamil Nadu

Completing the Postgraduate Diploma in Lifestyle Medicine has been a truly enriching journey. The program deepened my understanding of the scientific principles and clinical applications of lifestyle interventions for chronic disease management. The constant support, guidance, and encouragement from the faculty and the dedicated assistance of the supporting staff made the learning experience seamless and engaging. Their commitment to academic excellence and student welfare was truly commendable. This course has strengthened my ability to integrate holistic, evidence-based lifestyle practices into patient care and preventive health promotion.

Dr. Sachin Babu Rathod, 2024 Batch, Maharashtra

The PGDLM course has been a truly enriching experience that has transformed my perspective on patient care. It equipped me with the knowledge and practical skills to integrate lifestyle interventions into routine clinical practice, shifting my focus from disease management to health promotion and prevention. The well-structured modules, evidence-based content, and guidance from experienced faculty have empowered me to make meaningful changes in both my personal lifestyle and professional approach. This journey has strengthened my commitment to delivering holistic, patient-centered care.

Dr. Sneha P Mathew, 2024 Batch, Kerala

As a whole food plant-based nutrition consultant, much of the nutrition content was already familiar to me. However, the other pillars covered were truly informative and insightful. It was wonderful to see mainstream medical science now recognizing lifestyle as the first line of intervention for NCDs. Overall, it's an excellent course with great potential to evolve and get even better over time.

Dr. Rashi Tiwari, 2024 Batch, Karnataka

The PGDLM course has been an enriching experience that taught me how to integrate all aspects of health - physical, mental, and social—into my professional practice. Beyond academics, it offered valuable life lessons that have contributed to my personal growth and holistic understanding of healthcare.

Dr. Shubham Arora, 2024 Batch, Punjab



“I am the vine; you are the branches. If you remain in me and I in you, you will bear much fruit; apart from me you can do nothing”.

(John 15: 5)

