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Experts call to align policy and implementation for scalable cardiac care

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Key outcome at the three-day summit, organised by the Government of Goa in association with Tricog Health

The National CVD Summit 2026 concluded in Goa after three days of focused deliberations aimed at narrowing the gap between cardiovascular policy and on-ground implementation.

Organised by the Government of Goa in association with Tricog Health, the summit kicked off on 25 September 2026 at Varca, Goa, under the theme “Policy and Implementation for Scalable Cardiovascular Care.”

The summit brought together policymakers, cardiologists, physicians, endocrinologists, paediatric and maternal health specialists, public health leaders, researchers, programme implementers and health technology experts to examine the cardiovascular care continuum, from prevention and early detection to emergency response, referral, treatment and long-term management.

Across scientific presentations, state case studies and panel discussions, the focus remained on models that can move beyond isolated centres of excellence and work reliably across districts, states and varied health-system settings.

Vishwajit Rane, Minister for Health, Government of Goa, led the formal inaugural ceremony on 26 September and said, "Thirty-five years ago, when my father had a heart attack, there was no ambulance and no cardiac expertise nearby, only a drive to Goa Medical College and a phone call to doctors in Bombay and the United States for guidance. That is the gap this programme was built to close. In Goa, no patient is turned away, and no protocol is compromised, and patients get everything free of cost from Treatment to Medication."

The first day established the breadth of India’s cardiovascular challenge. Sessions examined the burden of cardiovascular disease (CVD) and the way hypertension, diabetes, dyslipidaemia and cardio-kidney-metabolic risk feed into it.

Wing Commander Dr Shamanna S. Iyengar, Chair, Scientific Committee, National CVD Summit 2026, and Consultant Cardiologist, Manipal Hospital, Bengaluru, said: "Cardiovascular disease remains the world's leading cause of death: 19.4 million lives lost in 2023, 28.6% of all deaths globally, with male CVD rates up nearly 43% since 1990. That picture lands squarely on India, where nearly 3.1 million lives were lost to CVD in 2024 alone, against a backdrop where diabetes, abdominal obesity and high cholesterol are now the norm rather than the exception."

Dr C. N. Manjunath, Member of Parliament and former Director of the Sri Jayadeva Institute of Cardiovascular Sciences & Research, delivered the keynote address on “Cardiovascular Care in India,” and said, “Sixty per cent of India lives without access to a cath lab, and every thirty minutes of delay raises the risk of death by seven per cent. We already have what we need: tenecteplase, AI-assisted diagnosis, and a hub-and-spoke model proven in both Karnataka and Goa. What's missing is the policy to match it, at scale, everywhere. Heart attack cannot wait."

A major focus of the summit was India’s response to ST-elevation myocardial infarction, where time to diagnosis and reperfusion can determine outcomes. The programme brought together implementation experiences from Goa, Uttar Pradesh, Karnataka, Odisha, Maharashtra, Tamil Nadu and Punjab, allowing delegates to compare how different states are approaching hub-and-spoke networks, first-contact diagnosis, transport, spoke capability, referral and data systems.

Goa’s own hub-and-spoke STEMI experience was discussed alongside other state models, giving the summit a practical implementation lens rather than a purely academic one.

A dedicated session on AI and technology explored the role of national-scale clinical operations, AI-enabled diagnostics, and the regulatory considerations involved in deploying medical devices within CVD programmes. This was followed by state reflections on implementation, allowing participating states to share what had worked, what remained difficult and what could be adapted elsewhere.