# GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

# RAJYA SABHA UNSTARRED QUESTION NO. 2205 TO BE ANSWERED ON 01<sup>ST</sup> JANUARY, 2019

#### RISE IN CASES OF VECTOR BORNE DISEASES

# 2205. DR. T. SUBBARAMI REDDY: SHRIMATI AMBIKA SONI:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether there is a rise in dengue, malaria and chikungunya cases in the last six months in the country, if so, the details thereof;
- (b) the steps taken by Government to keep the number of cases under control and encouraging people to take proper medical care;
- (c) whether medical camps were organised in the high-risk area and in remote areas; and
- (d) the logistics provided to the States and UTs like lab technicians, ambulances and medicines and details thereof?

# ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY)

(a): No. There is a decrease in number of Dengue, Chikungunya and Malaria cases during last six months in 2018 compared to the corresponding period in 2017 as below:

### Dengue & Chikungunya:

Year	Number of cases reported in last 6 months (June to November)	
	Dengue	Chikungunya
2017	134718	51736
2018	82763	37776

#### Malaria:

The number of malaria cases reported by States have declined from 805782 to 375836 i.e. by 53.36% and reported deaths from 104 to 96 i.e. by 63.89% from January to November 2018 (Provisional data), as compared to the same period in 2017.

(b): Government of India (GOI) has taken the following steps:

## Dengue and Chikungunya:

- Monitoring and supervision for early case detection and prevention and control through reviews and video conference at higher level.
- Advisories were issued to sensitize the States.
- Guidelines on case management were developed and shared with the States.
- Free diagnostic facilities through Sentinel Surveillance Hospitals (SSHs) and Apex Referral laboratories (ARLs) identified across the country. Test kits are supplied by GOI free of cost.
- Training imparted to the doctors on case management.
- Following Information Education Communication (IEC)/ Behaviour Change Communication(BCC)activities carried out to disseminate knowledge for prevention and control through advocacy meetings, campaign through television, Radio, social and digital media and print media.

#### Malaria:

- Early diagnosis and complete treatment.
- Integrated Vector Management (IRS, Long Lasting Insecticidal Nets (LLIN), larvivorous fish, chemical and bio-larvicide, source reduction)
- IEC/BCC activities.
- (c): Yes. Medical camps are organized by States in high-risk and remote areas as per requirement. For routine malaria diagnosis, Accredited Social Health Activists (ASHAs) have been provided with Rapid Diagnostic Tests (RDTs) for early diagnosis in the high-risk area and in remote areas.

#### (d): Dengue/Chikungunya:

For free diagnosis of Dengue and Chikungunya, GoI have identified 110 SSHs with laboratory facility in 2007 which have been gradually increased to 646 in 2018 across the country. For back up support of these laboratories, 16 ARLs were also identified. National Institute of Virology (NIV), Pune and Indian Council of Medical Research (ICMR) have been entrusted for production and supply of Enzyme-Linked Immunosorbent Assay (ELISA) based Immunoglobulin M (IgM) test kits to these laboratories. Cost is borne by GoI. For early detection of Dengue cases (for first 5 days), funds are provided to the States/Union Terriortries (UTs) in State Programme Implementation Plan (PIPs) for ELISA based NS1 kits.

#### Malaria:

Anti-malarials, Rapid Diagnostic Tests, Insecticide, etc are provided to States. 372 posts for Laboratory technicians have been sanctioned on contractual basis to 10 high malaria burden States i.e. Andhra Pradesh, Telangana, Chhattisgarh, Jharkhand, Madhya Pradesh, Odisha, Gujarat, Karnataka, Maharashtra and West Bengal under Domestic Budgetary support (DBS).