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

LOK SABHA STARRED QUESTION NO. 144 TO BE ANSWERED ON THE 25TH NOVEMBER, 2016 CASES OF CATARACT AND BLINDNESS

*144. SHRI C.S. PUTTA RAJU:

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

(a) whether the rise in pollution levels and ultraviolet rays has spurted cataract and blindness cases in the country and if so, the details thereof;

(b) whether any study has been conducted in the matter and if so, the details thereof;

(c) whether special camps are being organised in different hospitals across the country for free eye check up and if so, the details thereof; and

(d) whether schemes/programmes are under implementation for prevention, cure and care of cataract/blindness and if so, the details thereof?

ANSWER

THE MINISTER OF STATE FOR HEALTH AND FAMILY WELFARE (SHRI FAGGAN SINGH KULASTE)

(a) to (d): A statement is laid on the Table of the House

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 144* FOR 25TH NOVEMBER, 2016

(a) & (b) Dr. Rajendra Prasad Centre for Ophthalmic Sciences, All India Institute of Medical Sciences, New Delhi has informed that a Multi-Centric Collaborative Study was conducted by the Indian Council of Medical Research (ICMR) on the impact of ultraviolet rays (UVR) exposure on ocular health at the NCR Region (Rural Gurgaon), North Eastern Region (Rural Guwahati), coastal areas (Prakasam District of Andhra Pradesh) from 2010-16. The study has revealed significant association of Cataract with UV radiations at all the sites of study. Secondly, since India is a tropical country, the incidence of cataract is quite high. In addition, as per systematic reviews of world literature, most cataracts develop slowly with normal ageing. The cause of age-related cataract is multifactorial and not completely understood. However, cataracts also may be related to genetic diseases, medical conditions such as diabetes, poor nutrition, sun damage, drugs (steroids), smoking, alcohol. Further, eye trauma may also influence cataract formation in addition to ultraviolet rays.

Further, rise in air pollution can lead to allergies in eyes of people. However, there is no scientific evidence of pollution being a cause of cataract formation.

As per Rapid Assessment of Avoidable Blindness (RAAB) national survey conducted in 2007, the prevalence of blindness has reduced from the earlier 1.1% in 2001-02 to 1% in 2007. Cataract accounts for 62% of total blindness. Hence, there is no rise in the cases of cataract per million population.

(c) Eye screening camps are organized under the direct supervision of District Health authorities in States under National Programme for Control of Blindness (NPCB) to identify the patients suffering from cataract and other eye ailments. The patients identified with cataract and other blinding disorders are provided appropriate treatment/surgery at the District/base hospitals.

Non-Governmental Organizations (NGOs) registered under NPCB also hold outreach camps with the permission of district health authorities concerned to screen patients for Cataract and bring them to their base hospitals for Cataract surgery free of cost. These NGOs are provided grant-in-aid @ Rs.1000/- per Cataract operation as per NPCB norms. (d) NPCB is one of the centrally sponsored schemes under implementation in the Ministry of Health and Family Welfare for prevention, cure and care of cataract/blindness in the country.

The goals and objectives of the programme are as under:

- To reduce the backlog of blindness including cataract through identification and treatment of blind at primary, secondary and tertiary levels based on assessment of the overall burden of visual impairment in the country.
- Develop and strengthen the strategy of NPCB for "Eye Health" and prevention of visual impairment through provision of comprehensive eye care services and quality service delivery.
- Strengthening and upgradation of Regional Institutes of Ophthalmology (RIOs) to become centre of excellence in various sub-specialties of ophthalmology.
- Strengthening the existing and developing additional human resources and infrastructure facilities for providing high quality comprehensive Eye Care in all Districts of the country;
- To enhance community awareness on eye care and lay stress on preventive measures;
- Increase and expand research for prevention of blindness and visual impairment;
- To secure participation of Voluntary Organizations/Private Practitioners in eye Care.
