

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

**LOK SABHA
UNSTARRED QUESTION NO. 616
TO BE ANSWERED ON 18TH NOVEMBER, 2016**

KIDNEY AILMENTS

616. SHRI PINAKI MISRA:

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

- (a) whether the Government is aware of the increase in the kidney related ailments, if so, the reasons therefor;
- (b) the details of district hospitals in the country which are equipped with facility for treating kidney ailments, dialysis and kidney transplantations;
- (c) the ratio of Nephrologists and kidney patients in the country; and
- (d) the steps taken to bridge the gap of this ratio?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SMT. ANUPRIYA PATEL)**

- (a): No nationwide scientific estimation of number of patients of Chronic Kidney Diseases (CKD) has been carried out to make such an inference.
- (b): Data regarding availability of facilities for treating kidney ailments, providing dialysis services and kidney transplantation in District Hospitals is not maintained centrally.
- (c): No data with respect to nephrologist-patient ratio is maintained centrally.
- (d): Public Health being a State subject, it is primarily the responsibility of the State Governments to provide health care to the people. However, financial and technical assistance is being provided to the States/UTs under the NHM for strengthening existing healthcare facilities including setting up of infrastructure, training of doctors and para medical staff, etc. as per State specific Programme Implementation Plans (PIPs).

The guidelines for National Dialysis Program under the National Health Mission (NHM) to provide for dialysis facilities in District Hospitals under Public Private Partnership (PPP) mode have been released for implementation by State / UT Governments.

In order to meet the shortage of doctors/ specialists in the country, the Government has taken a number of steps which include:

- i. Relaxation in the norms for setting up of medical college in terms of requirement for land, faculty, staff, bed/ bed strength and other infrastructure.
- ii. Enhancement of age limit for appointment/ extension/ re-employment against posts of teachers/dean/principal/ director in medical colleges from 65-70 years.
- iii. Financial support to State medical colleges, under the scheme of “Strengthening and Upgradation of State Government Medical Colleges” to increase postgraduate seats in various disciplines or to start new postgraduate medical courses.
- iv. DNB qualification has been recognized for appointment as faculty to take care of shortage of faculty.
- v. The ratio of teachers to students has been revised from 1:1 to 1:2 for all MD/MS disciplines.
- vi. Post graduate and Graduate medical degrees, when both degrees are obtained from five English speaking countries (US, UK, Canada, Australia and New Zealand) have been recognized in India. Similarly, PG degrees of these five countries are also recognized.

Further, the involvement of private sector in provisioning of dialysis services in PPP mode in district hospitals will help improve availability of services of nephrologist in public facilities.