

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

**LOK SABHA
UNSTARRED QUESTION NO. 2155
TO BE ANSWERED ON 28TH JULY, 2017**

LACK OF TRANSPORT FACILITIES FOR HEART ATTACK PATIENTS

2155. DR. P. VENUGOPAL:

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

- (a) whether delay in reaching hospital due to lack of transportation for the heart attack patients is one of the leading cause of fatalities and if so, the details thereof and remedial steps taken in this regard;
- (b) whether it is true that the Indian Council of Medical Research has been invited to take up the programme towards heart attack management; and
- (c) if so, the details thereof?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)**

(a): Delay in reaching hospital due to various reasons is one of the causes of fatalities. Public health and hospitals being a State subject, the responsibility for provision of transportation for patients including heart attack patients lies in the jurisdiction of the respective State/UT Governments. However, under the National Health Mission (NHM), technical and financial support is provided to States/UTs to strengthen their healthcare systems including support for ambulances/ emergency patient transport services, based on the proposals made by the States/UTs in their Programme Implementation Plans (PIPs) within their overall resource envelop.

(b) & (c): Indian Council of Medical Research (ICMR) has supported two studies- one in south India titled “The Tamil Nadu collaborative assertive reperfusion Initiative for ST-segment elevation myocardial infarction (TN-STEMI)”. It was concluded in this study that hub and spoke model of a STEMI system of care that connects peripherally-located spoke health centers with large Percutaneous Coronary Intervention (PCI) hub hospitals is a feasible and effective model for STEMI reperfusion in Lower Middle Income Countries such as India.

Another study is in north India titled “Delhi Emergency life Heart-Attack”. It aims to develop an efficient, cost-effective service for the accelerated treatment of STEMI for the National Capital Territory of Delhi and to provide a viable and replicable model of STEMI care for the whole of the country, including 24 hour emergency response system for a pre-hospital thrombolysis service for treatment of acute myocardial infarction along with a model information technology backbone. The objective of the study includes, decreasing response times of suspected heart attack victims, education and upgrading skills of healthcare providers and rapid triage, identification and transfer of suspected heart attack patients.

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