

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

**LOK SABHA  
UNSTARRED QUESTION NO. 981  
TO BE ANSWERED ON 21<sup>ST</sup> JULY, 2017**

**RISE IN CHOLESTEROL LEVEL**

**981. SHRI ALOK SANJAR:**

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

- (a) whether the number of patients have increased due to increased cholesterol;
- (b) if so, the details thereof;
- (c) whether refined/ edible oils are also responsible for increase in cholesterol level;
- (d) if so, the details thereof along with the remedial measures taken by the Government in this regard;
- (e) whether the Government has conducted regular testing of the edible oils available in markets as per laid down norms;
- (f) if so, the details and the outcome thereof; and
- (g) if not, the reasons therefor?

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

(a) to (d) : Raised Cholesterol is a metabolic risk factor for Non-Communicable Diseases(NCDs) such as Cardiovascular Diseases.

According to WHO Report on 'Non Communicable Diseases Country Profile, 2014, 27.1% of the Indian population is estimated to have raised cholesterol level.

Indian Council of Medical Research (ICMR) has informed that according to the Report of National Commission on Macroeconomics and Health, Cardiovascular Diseases (CVDs) cases were estimated to be 641 lakh in the year 2015. International Diabetes Federation (IDF) Diabetes Atlas, 7th Edition, the prevalence of diabetes in India in the age group of 20 years and above is 69.2 million in 2015.

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Intake of high quantity of fat/oil along with the type of fat (especially saturated fatty acids) are known to affect the blood cholesterol levels.

While Health is a State Subject, the Central Government supplements the efforts of State/UT Governments to create awareness and provide health care facilities. Government of India is implementing National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) for interventions up to District level under the National Health Mission. It has focus on awareness generation for behaviour and life-style changes, screening and early diagnosis of persons with high level of risk factors and their treatment and referral (if required) to higher facilities for appropriate management for Non-communicable Diseases.

For early diagnosis, a programme is initiated for “Population-based Screening of common NCDs viz. Diabetes, Hypertension and Common cancers (Oral, Breast, Cervical)” utilizing the services of the Frontline-workers and Health-workers under existing Primary Healthcare System. This process will also generate awareness on risk factors of common NCDs.

(e) to (g): Random sampling and testing of food products , including edible oils are being done by the Officials of Food Safety Departments of the respective States/ Union Territories to check compliance of the standards laid down under the Food Safety and Standards Act, 2006, Rules and Regulations made thereunder. In cases where the food samples are found to be non-conforming to these norms, recourse is taken to penal provisions under Chapter IX of the FSS Act, 2006

As informed by Food Safety and Standards Authority of India (FSSAI), no separate data with regard to enforcement actions relating to edible oils is available, however, based on information made available by the States /UTs to FSSAI, 45085 food samples including samples of edible oils were received, out of which 7515 were found non-conforming during the year 2016-17. The respective States/UTs are taking action as per Food Safety and Standards Act, 2006.

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