

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

**LOK SABHA  
UNSTARRED QUESTION NO. 1244  
TO BE ANSWERED ON 22ND DECEMBER, 2017**

**MULTI MEDICINE RESISTANCE**

**1244. SHRI ARJUN LAL MEENA:  
SHRI OM BIRLA:  
SHRI SUNIL KUMAR SINGH:  
SHRI NISHIKANT DUBEY:**

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

- (a) the aims, objectives and salient features of the National Action Plan on Antimicrobial Resistance (NAP-AMR);
- (b) the progress and the current status of the action plan;
- (c) whether the Government has established any mechanism for effective implementation and surveillance of the NAP-AMR and if so, the details thereof;
- (d) the national as well as State-wise data of deaths due to infectious diseases in India; and
- (e) whether the Indian Medical Association has asked the doctors to minimise prescription of antibiotic drugs, if so, the details thereof?

**ANSWER**

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

- (a): National Action Plan on Antimicrobial Resistance (NAP-AMR) has 6 strategic priorities as under:
- i. Improve awareness and understanding of AMR through effective communication, education and training
  - ii. Strengthen knowledge and evidence through surveillance
  - iii. Reduce the incidence of infection through effective infection prevention and control
  - iv. Optimize the use of antimicrobial agents in health, animals and food
  - v. Promote investments for AMR activities, research and innovations
  - vi. Strengthen India's leadership on AMR

Contd.....

- (b): The progress and the current status of the action plan is as under:
- Under the programme, a National AMR surveillance lab network has been established which currently includes 21 laboratories. Currently AMR surveillance is being done for a total of seven pathogens. The National AMR surveillance network SoP has also been finalized.
  - On 21<sup>st</sup> July 2017 NCDC successfully enrolled in Global AMR surveillance system (GLASS) under World Health Organization (WHO).
  - The Strategic National Action Plan for containment of AMR was developed involving stakeholders from various ministries/ sectors.
  - National Treatment Guidelines for antimicrobial use in infectious diseases have been developed and uploaded on NCDC website ([www.ncdc.gov.in](http://www.ncdc.gov.in)). Also, an interim concise guideline on infection control has been uploaded on NCDC website.
  - Schedule H-1 has been incorporated in Drug and Cosmetic rules to regulate the sale of antimicrobials in the country

(c): Government has established following mechanism for effective implementation and surveillance of the NAP-AMR;

**a. Intersectoral Coordination Committee on AMR** under the Chairmanship of Secretary (Ministry of Health & Family Welfare),

**b. Technical Advisory Group on AMR** under the Joint Chairmanship of Director General of Health Services, Ministry of Health & Family Welfare and Secretary, Department of Health Research & DG, ICMR

**c. Core Working Group on AMR** under the Chairmanship of Director, National Centre for Disease Control

**Delhi Declaration** - an inter-ministerial consensus on AMR, was signed by the Ministers of the concerned ministries pledging their whole hearted support in AMR containment.

Further, NCDC in partnership with Indian Medical Association is involved in various AMR activities such as antimicrobial stewardship, Trainings for Doctors/Nurses on AMR, Spreading awareness among Hospital Staff.

(d): The State wise data on deaths due to influenza A (H1N1), Malaria, Chikungunya, Japanese Encephalitis, Acute Encephalitis Syndrome and Kala azar is placed at annexure.

(e): Yes. Indian Medical Association (IMA) has disseminated information about judicious usage of antibiotics by meetings, emails, webcast and newsletters to its members.

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**Annexure**

<b>State-wise Deaths Due to infectious diseases</b>							
<b>Sl No</b>	<b>State / U.T.</b>	<b>Diseases</b>					
		<b>Influenza H1N1 (2017) as on 17.12.2017</b>	<b>Malaria (2016)</b>	<b>Chikungunya (2016)</b>	<b>Japanese Encephalitis (2016)</b>	<b>Acute Encephalitis Syndrome(2016)</b>	<b>Kala-Azar (2016)</b>
1	Andhra Pradesh	14	0	0	0	0	0
2	Arunachal Pradesh	1	0	0	0	0	0
3	Assam	5	5	0	92	187	0
4	Bihar	0	0	0	25	102	0
5	Chhattisgarh	64	0	0	0	0	0
6	Goa	12	0	0	0	0	0
7	Gujarat	431	2	0	0	0	0
8	Haryana	9	0	0	0	0	0
9	Himachal Pradesh	15	0	0	0	0	0
10	J & K	19	0	0	0	0	0
11	Jharkhand	2	10	0	5	5	0
12	Karnataka	15	0	0	0	0	0
13	Kerala	76	1	0	0	5	0
14	Madhya Pradesh	146	1	0	0	0	0
15	Maharashtra	775	25	0	1	1	0
16	Manipur	1	0	0	1	1	0
17	Meghalaya	0	44	0	4	4	0
18	Mizoram	0	1	0	0	0	0
19	Nagaland	0	0	0	0	0	0
20	Odisha	54	77	0	42	115	0
21	Punjab	86	1	0	0	0	0
22	Rajasthan	255	0	0	0	0	0
23	Sikkim	0	0	0	0	0	0
24	Tamil Nadu	17	0	0	0	3	0
25	Telangana	21	1	0	0	0	0
26	Tripura	0	15	0	1	1	0
27	Uttarakhand	22	0	0	0	0	0
28	Uttar Pradesh	132	0	0	73	621	0
29	West Bengal	26	59	0	39	256	0
30	A & N Islands	1	0	0	0	0	0
31	Chandigarh	6	0	0	0	0	0
32	D & N Haveli	4	0	0	0	0	0
33	Daman & Diu	2	0	0	0	0	0
34	Delhi	12	0	0	0	0	0
35	Lakshadweep	0	0	0	0	0	0
36	Puducherry	9	0	0	0	0	0
<b>Total</b>		<b>2232</b>	<b>242</b>	<b>0</b>	<b>283</b>	<b>1301</b>	<b>0</b>

Source: National Health Profile brought out by CBHI, Dte.GHS and NCDC

