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

LOK SABHA UNSTARRED QUESTION NO. 1123 TO BE ANSWERED ON 08TH FEBRUARY, 2019

UNAIDS REPORT

1123. SHRIMATI MEENAKASHI LEKHI:

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

(a) whether a report by UNAIDS states that only 79 per cent of people with HIV in India were aware of their condition and only 56 per cent of them has access to treatment, if so, the details thereof and the steps taken by the Government to ensure that the early detection and treatments like viral load tests are made available to them;

(b) whether the Government is aware of the fact that tuberculosis has been one of the leading reasons for death of HIV patients and if so, whether the Government has formulated any scheme for the convergence of HIV treatment under the existing tuberculosis programmes and if so, the details thereof;

(c) whether follow up procedures are conducted to ensure that the virus load tests are done on patients; and

(d) if so, the details thereof?

ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY)

(a): Yes, Out of the total estimated 21.4 lakh people living with HIV (PLHIV) (2017 estimates) in India, 16.8 lakh (79%) are aware of their HIV status, and out of those who know their status, 11.9 lakh (56%) are on Anti Rota Virus Treatment (ART).

The steps taken by the Government to address early detection and treatment is annexed.

(b): Government is aware of the fact that tuberculosis has been one of the leading reasons for death of HIV patients.

The government has not formulated any scheme for convergence of the coverage of HIV treatment under the existing TB programme because as per the recommendation of the National Expert group on TB-HIV, provision of HIV treatment from TB treatment centres was not recommended as PLHIV are 26-31 times higher risk of developing TB.However, collaborative activities exist for treatment of TB-HIV co-infected patients which include, Single window service delivery to HIV positive individuals through provision of TB services at (ART) centres/ HIV treatment centreitself, Intensified TB Case Finding (ICF) by deployment of rapid molecular diagnostics, Cartridge Based Nucleic Acid Amplification Test CBNAAT(rapid molecular diagnostic) as a primary diagnostic tool for detection of tuberculosis. Also, TB preventive Therapy is being given to HIV infected individuals.

(c) & (d): Patients are regularly monitored for routine Viral Load Testing and they are informed whenever their turn is due for routine viral load testing.

I. The steps taken by the Government for early detection of HIV

(1) Integrated Counselling and Testing Centre(ICTC)

An Integrated Counseling and Testing Centre (ICTC) presently known as HIV Counselling and testing Service centre (HCTS) is a place where free counseling and testing for HIV is offered to a person on his own free will or as advised by a medical provider. The population availing these services is mainly Pregnant and breastfeeding women as well as persons engaged in the high risk behavior, STI patients, TB patients and are more prone to acquire the HIV infection and the babies born to HIV positive women (Early Infant Diagnosis)

In India, ICTCs/HCTS are often the first interface of citizens with the entire gamut of preventive, care, support and treatment. Currently (till Dec. 2018) HIV counseling and Testing Service is getting to public through 29,558 ICTC/HCTS centers.

Purpose	•	Integrated Counselling & Testing Centre (ICTC) is a place where a person is counselled and
		tested for HIV on his own free will or as advised by a medical provider.
Functions	Á	Early detection of HIV.
	Á	Provision of basic information on modes of transmission and prevention of HIV/AIDS so as to
		promote behavioural change and reduce vulnerability.
	Á	Link people with other HIV prevention, care and treatment services.
	Á	ICTC plays a crucial role in early detection of HIV as well as promoting behavioural change
		among the high risk population so as to prevent HIV infection.
	Á	Prevention of Parent to Child Transmission (PPTCT) Services for HIV infected Pregnant women
		and Breast feeding mothers.
	Á	Providing EID (Early Infant Diagnosis) services to HIV exposed babies.
Priority	Á	Populations more vulnerable to HIV or practice high risk behaviour are the target for counselling
Population		& testing at ICTC.
	Á	It is not the mandate of ICTC to test everybody in the general population.

(2) Community Based Screening of HIV (CBS)

National AIDS Control Programme (NACP) has launched Community Based Screening of HIV in 2017. The Community-based screening (CBS) is an important approach for improving early diagnosis, reaching firsttime testers and people who seldom use clinical services, including men and adolescents in high-prevalence settings and HRG populations. To improve HIV Counselling and Testing Services (HCTS) access and coverage, community-based HIV screening is carried out through various approaches such as

- (i) Mobile HCTS;
- (ii) Screening by ancillary health-care providers (ANC);
- (iii) Screening for HIV by targeted intervention (TI-ICTC);
- (iv) HCTS for prison inmates and
- (v) HCTS at the workplace.

As on Dec 2018, total number of CBS sites established in India is 1821.

II. Steps taken by Government for Treatment of PLHIV

The Government provides free antiretroviral therapy to all people living with HIV irrespective of their CD4 count, age, gender or population. There are 544 Anti Retroviral Treatment (ART) Centres and 1108 Link ART Centers established all over country.

III. Steps taken by Government for Viral Load Testing

Viral Load testing facility is now available, free of cost, at 525 ART centers. A private firm has been contracted for collection, transportation, testing and reporting for viral load. Simultaneously expansion of viral load testing laboratories in public sector is in process.