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

# LOK SABHA UNSTARRED QUESTION NO. 33 TO BE ANSWERED ON 21<sup>ST</sup> JUNE, 2019

#### **MULTI-DRUG-RESISTANT TB**

### 33. DR. UMESH G. JADHAV: SHRI FEROZE VARUN GANDHI:

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

- (a) whether as per the World Health Organization TB report, 2018, India continues to have the maximum TB cases in the world and accounts for nearly 27 per cent of the 10 million new patients in the world;
- (b) if so, the reaction of the Government thereto;
- (c) whether the number of patients suffering from Multi-Drug-Resistant TB in the country are among the highest in the world;
- (d) if so, the details thereof indicating the number of patients who have been cured and died during the last three years, State/ UT-wise; and
- (e) the further steps taken/being taken by the Government to combat antibiotic resistance (ABR) as a phenomenon and prevent new cases of TB from emerging?

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

- (a): The estimated incidence of Tuberculosis in India as per the Global TB report 2018 is 204 per lakh population for the year 2017. India accounts for 27.4 lakh estimated new TB cases annually, which is the highest in terms of absolute numbers. However, in terms of incidence of Tuberculosis per lakh population, India ranks 35th in the world.
- (b): The Ministry has developed the National Strategic Plan (NSP) for Tuberculosis (2017-2025) with the goal of ending TB by 2025.

The details are indicated in reply to part (e).

(c): As per Global TB report (2018), the estimated Multi Drug Resistant/Rifampicin Resistant (MDR/RR) TB patient was 5,58,000 globally and 1,35,000 in India, highest in the world in terms of number of cases. India stands at 22<sup>nd</sup> among 30 high burden countries for MDR RR TB (Global TB report 2018) in terms of estimated number of cases per lakh population.

- (d): The number of patients cured of TB in the last three years State/ UT-wise is enclosed as Annexure 1. The number of deaths reported due to TB State/ UT-wise in the last three years is enclosed as Annexure 2.
- (e): The Ministry of Health and Family Welfare has taken various regulatory measures to curb the misuse of antibiotics. Details are as under-
  - Antibiotics are included in Schedule H and H1 of the Drugs and Cosmetics Rules, 1945 and are required to be sold by retail only under the prescription of a Registered Medical Practitioner. Further in order to regulate the human consumption of antibiotics to restrict the over the counter availability of certain antibiotics, the Drug & Cosmetics Rules, 1945 have since been amended vide Gazette Notification No GSR 588 (E) dated 30.08.2013 incorporating a new, namely, Schedule H1 under the Drugs & Cosmetics Rules containing 47 drugs which include antibiotic drugs, Anti TB drugs and certain habit-forming drugs. The drugs falling under Schedule H1 are required to be sold in the country with the following conditions:
    - o The supply of a drug specified in Schedule H1 shall be recorded in a separate register at the time of the supply giving the name and address of the prescriber, the name of the patient, the name of the drug and the quantity supplied and such records shall be maintained for three years and be open for inspection.
    - The drug specified in Schedule H1 shall be labelled with the symbol Rx which shall be in red and conspicuously displayed on the left top corner of the label, and shall also be labelled with the following words in a box with a red border: "SCHEDULE H1 DRUG-WARNING:
      - -It is dangerous to take this preparation except in accordance with the medical advice.
      - -Not to be sold by retail without the prescription of a Registered Medical Practitioner."
  - The Drugs and Cosmetics Rules were amended by the Ministry of Health and Family Welfare vide Gazette notification G.S.R. 28(E) dated 17.01.2012, to make a provision that the container of a medicine for treatment of food producing animals shall be labelled with the withdrawal period of the drug for the species on which it is intended to be used.
  - The Department of Animal Husbandry, Dairying and Fisheries has issued a circular to all Directors/Commissioners (Animal Husbandry) of all state and UTs vide their letter no. 102-74/2014-Trade Dated on 03.06.2014 and directed for the judicious use of antibiotics and hormones for the treatment of ailing food producing animals and at the same time use of antibiotics and hormones in animal feed should also be stopped. Subsequently DCG (I) has also issued an advisory to all States/UTs on 12.09.2014 that use of Antibiotics and Hormones in animal feed should also be stopped.

The Ministry has developed the National Strategic Plan (NSP) for Tuberculosis (2017-2025) with the goal of ending TB by 2025.

### The key focus areas are:

- Early diagnosis of all the TB patients, prompt treatment with quality assured drugs and treatment regimens along with suitable patient support systems to promote adherence.
- Engaging with the patients seeking care in the private sector.
- Prevention strategies including active case finding and contact tracing in high risk / vulnerable population
- Airborne infection control.
- Multi-sectoral response for addressing social determinants.

### Annexure 1

	Number of TB patients Cured			
State	2016	2017	2018	
Andaman & Nicobar				
Islands	147	179	178	
Andhra Pradesh	32178	49892	33354	
Arunachal Pradesh	901	648	837	
Assam	14593	12095	11434	
Bihar	28841	21189	19096	
Chandigarh	1156	1185	1163	
Chhattisgarh	12349	11881	13044	
Dadra & Nagar Haveli	234	210	279	
Daman & Diu	102	123	104	
Delhi	17157	16543	14105	
Goa	614	601	506	
Gujarat	45238	47022	43251	
Haryana	17945	14464	16573	
Himachal Pradesh	6142	5806	6059	
Jammu & Kashmir	4027	3478	2709	
Jharkhand	16190	15872	14226	
Karnataka	26600	25648	29307	
Kerala	10433	8982	9384	
Lakshwadeep	22	10	29	
Madhya Pradesh	43302	41750	43341	
Maharashtra	48956	42415	43414	
Manipur	696	603	585	
Meghalaya	1673	1198	848	
Mizoram	589	457	384	
Nagaland	1068	844	778	
Odisha	20069	16278	20961	
Puducherry	657	672	745	
Punjab	15782	14654	14726	
Rajasthan	39989	39613	37646	
Sikkim	475	381	294	
Tamil Nadu	34404	33188	40293	
Telangana	18779	20264	19692	
Tripura	1362	983	864	
Uttar Pradesh	112973	81622	76760	
Uttarakhand	5852	4761	4659	
West Bengal	43272	40626	41089	
India	6,24,767	5,55,904	5,62,717	

## Statewise deaths reported due to TB in India

State	2014	2015	2016
Andaman & Nicobar	38	17	21
Andhra Pradesh	3089	2764	4537
Arunachal Pradesh	68	74	39
Assam	1759	1785	1588
Bihar	1914	1800	1415
Chandigarh	48	65	68
Chhattisgarh	1350	1436	1596
Dadar & Nagar Haveli	18	18	15
Daman & Diu	9	14	14
Delhi	1281	1296	1370
Goa	52	45	49
Gujarat	4312	4657	5087
Haryana	1709	1700	1543
Himachal Pradesh	537	539	547
Jammu & Kashmir	292	316	342
Jharkhand	1465	1192	994
Karnataka	4348	4192	3958
Kerala	1084	953	961
Lakshadweep	2	1	1
Madhya Pradesh	3574	3761	3816
Maharashtra	7629	6904	6121
Manipur	75	77	54
Meghalaya	190	214	164
Mizoram	87	93	56
Nagaland	77	44	49
Orissa	2451	2380	2162
Pondicherry	64	55	63
Punjab	1989	1786	1799
Rajasthan	3428	3667	3877
Sikkim	222	38	44
Tamil Nadu	4095	4205	4118
Telangana	2050	1926	0
Tripura	141	162	113
Uttar Pradesh	8736	10233	8256
Uttarakhand	537	512	443
West Bengal	4506	4376	4448
TOTAL	63226	63297	59728