

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

LOK SABHA
UNSTARRED QUESTION NO. 309
TO BE ANSWERED ON 21.07.2023

“SPREAD OF DENGUE”

309: SHRI MANICKAM TAGORE B. :

Will the **Minister of Health and Family Welfare** be pleased to state:

- (a) whether it is a fact that the infection geography of Dengue which was restricted to 8 States in 2001, currently covers all the States/UTs in the country and if so, the details thereof, State/UT-wise;
- (b) whether it is a fact the shortage of entomologists, a trickier vector, increased travel, and less than optimal public participation in prevention were the causes of the spread of dengue across the country and if so, the details thereof;
- (c) whether the Indian Council of Medical Research (ICMR) has been looking at increasing the awareness and promoting prevention, people participation, and use of the latest technology including satellite imaging and drones to map vulnerable areas; and
- (d) if so, the details thereof?

ANSWER

THE MINISTER OF STATE FOR MINISTRY OF HEALTH AND FAMILY WELFARE
(PROF. S.P. SINGH BAGHEL)

- (a) After a major outbreak of Dengue in 1996, it has spread to newer geography. Currently, Dengue cases are reported from all the States and Union Territories except Ladakh. A statement showing year-wise number of States/UTs reporting Dengue cases since 1996 till 2022 is at **Annexure- I** and the State/UT-wise Dengue cases in the Country during the year 2022 is at **Annexure –II**.
- (b) Dengue cases are increasing due to many man-made and ecological factors. Shortage of Entomologists is an important factor; therefore, Government of India provisioned budget for contractual Entomologists for the States under NHM. Aedes mosquito, the vector of Dengue breeds in containers, rests in dark places, bites during daytime, transovarian transmission of virus from infected

female mosquito to next generation through eggs and ability of eggs to survive in dry conditions for more than one year makes the vector a trickier one to control. Increased travel also helps in introduction of virus and vector mosquito in the newer areas. Public participation is very important in preventing Dengue vector mosquito breeding in and around the houses and to reduce the risk of transmission by adoption of personal protection measures.

(c) and (d) National Center for Vector Borne Diseases Control (NCVBDC), States, Union Territories and Indian Council of Medical Research (ICMR) carry out various awareness activities to promote people participation in prevention of Dengue. ICMR has introduced latest technologies like use of Remote Sensing, Geographical Information Systems, Drones and integrated with Artificial Intelligence (AI) to facilitate the risk mapping of vulnerable areas.

Annexure-I

Year-wise number of States/UTs reported Dengue cases since 1996

Year	Number of States/UTs reported	Total cases
1996	7	16517
1997	9	1177
1998	8	707
1999	9	944
2000	8	650
2001	12	3306
2002	12	1926
2003	12	12754
2004	15	4153
2005	14	11985
2006	18	12317
2007	18	5534
2008	18	12561
2009	20	15535
2010	27	28292
2011	27	18860
2012	32	50222
2013	31	75808
2014	31	40571
2015	34	99913
2016	34	129166
2017	34	188401
2018	34	124493
2019	34	205243
2020	34	44585
2021	35	193245
2022	35	233251

Annexure-II**State-wise Dengue cases in the Country during the year 2022**

Sl. No.	State/UTs	2022
1	Andhra Pradesh	6391
2	Arunachal Pradesh	114
3	Assam	1826
4	Bihar	13972
5	Chhattisgarh	2679
6	Goa	443
7	Gujarat	6682
8	Haryana	8996
9	Himachal Pradesh	3326
10	Jharkhand	290
11	Karnataka	9889
12	Kerala	4432
13	Madhya Pradesh	3318
14	Meghalaya	26
15	Maharashtra	8578
16	Manipur	503
17	Mizoram	1868
18	Nagaland	154
19	Odisha	7063
20	Punjab	11030
21	Rajasthan	13491
22	Sikkim	264
23	Tamil Nadu	6430
24	Tripura	56
25	Telangana	8972
26	Uttar Pradesh	19821
27	Uttarakhand	2337
28	West Bengal	67271
29	Andaman & Nicobar Islands	1014
30	Chandigarh	910
31	Delhi	10183
32	Dadra & Nagar Haveli	685
	Daman & Diu	228
33	Jammu & Kashmir	8269
34	Ladakh	
35	Lakshadweep	67
36	Puducherry	1673