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

# LOK SABHA UNSTARRED Q. No 2013 TO BE ANSWERED ON 30<sup>th</sup> JULY, 2021

#### **NEW STRAINS OF CORONAVIRUS**

#### 2013 SHRI NAMA NAGESWARA RAO

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

- (a) whether the new strains of Coronavirus like Delta plus, Lambda, etc. are more infectious, if so, details thereof;
- (b) the reasons for the recent surge in Coronavirus cases in some States/UTs including Kerala, Arunachal Pradesh, Tripura, Odisha, Chhattisgarh and Manipur;
- (c) the steps taken by the Government for urgent control and containment measures of the disease; and
- (d) the details of the efficacy of the vaccine available in the country in fighting the existing and new strains of Coronavirus?

#### **ANSWER**

## THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. BHARTI PRAVIN PAWAR)

(a) to (d): As per WHO, there is some evidence to indicate higher transmissibility for cases infected with variants of SARS-CoV-2 like Delta and Delta plus.

Ministry of Health & Family Welfare after expert deliberations has concluded that the existing clinical management protocol for managing COVID-19 cases suffices for treatment of cases infected with variants of COVID-19 and doesn't warrant any change.

Easing of lockdown combined with pandemic fatigue, lack of community adherence to COVID appropriate behavior and evolution and circulation of more transmissible variants of SARS-CoV-2 viruses can be attributed for the surge in Coronavirus cases in some States/UTs.

Although Health is a state subject, Government of India has provided the required technical support and has also supported the states through logistic and financial support to further strengthen the existing health infrastructure to tackle COVID-19 pandemic.

Some of the ongoing initiatives to further strengthen healthcare infrastructure include:

- A three-tier arrangement of dedicated COVID-19 health facilities [(i) COVID Care Center (CCC); (ii) Dedicated COVID Health Centre (DCHC) and (iii) Dedicated COVID Hospital (DCH)] has been implemented in the country to reduce the risk of cross infection to non-COVID patients as well as to maintain continuity of non-COVID essential health services in the country.
- Government of India has roped in tertiary care hospitals under other ministries to supplement
  the hospital facilities. Further, many large temporary treatment facilities were established by
  DRDO to manage surge in COVID-19 cases in the country. The isolation bed capacity and
  ICU bed capacity was also enhanced continuously.
- The daily liquid medical oxygen (LMO) supply was increased by enhancement of LMO production in steel plants as well as in other LMO plants. Further, restrictions were also imposed on industrial use of oxygen.
- Online digital solutions viz. Oxygen Demand Aggregation system (ODAS) and Oxygen Digital Tracking System (ODTS) have been developed to ascertain the demand for medical oxygen from all medical facilities and to track their transportation.
- To avoid wastage of medical oxygen, guidelines on rational use of oxygen were issued on 25<sup>th</sup> September 2020, and further revised and disseminated to States on 25<sup>th</sup> April 2021.
- To generate oxygen at the health facility level, PSA plants are being established in each district hospitals to reduce the burden on the medical oxygen supply grid across the country.
- Further, to fast-track the availability of Medical Oxygen in rural and peri-urban areas, more than 39,000 oxygen concentrators have been allocated to various States.
- A COVID Drugs Management Cell (CDMC) has been set up in the Department of Pharmaceuticals (DoP) to oversee the management of smooth supply of drugs used in COVID-19 management.
- Action is initiated at the National level to augment production of critical drugs including import besides support in terms of equitable distribution of the critical supplies.
- A Drugs Coordination Committee (DCC) has been constituted as an institutional mechanism
  under Department of Pharmaceuticals for efficient decision making on all the issues with
  respect to COVID-19 related drugs including availability through inter-departmental
  consultations.
- All States/UT and State Drugs Controllers have been requested to verify stock of the drug
  and check other malpractices and take effective steps to curb hoarding and black marketing
  of Remdesivir.

- Ministry of Health & Family Welfare continues to provide technical guidance for managing various aspects of COVID-19. So far more than 150 guidelines/advisories/SoPs/plans have been provided to States/UTs.
- Further COVID-19 treatment protocols and advisories both for adults as well as pediatric age groups were issued and widely disseminated to promote rational use of drugs and oxygen.
- Under the National COVID Vaccination Program, Government of India is procuring vaccines and providing them free of cost to States and UTs. As on 25<sup>th</sup> July 2021, a total of about 44.91 crore doses have been supplied to States/UTs from all sources i.e Government of India's Covid vaccine supply free of cost to all States/UTs, State/UTs and Private Hospitals procured Covid vaccine.

Union Government has provided financial support to States/UTs for ramping up Health Infrastructure and support all aspects of management of COVID-19.

- During the F.Y. 2019-20. funds to the tune of Rs.1113.21 crore was released to the States/UTs under NHM.
- In September 2020, the Union Government allowed the states to spend maximum 35% of annual allocation of funds under SDRF for the financial year 2019-20. The ceiling was further enhanced to 50% during the financial years 2020-21 and 2021-22 for containment measures of COVID-19.
- During the FY 2020-21, funds to the tune of Rs.8257.88 crore has been released to the States/UTs towards the India COVID-19 Emergency Response and Health System Preparedness Package.
- In addition, 'India COVID-19 Emergency Response & Health System Preparedness Package: Phase-II' has also been approved by the Cabinet with Rs 23,123 crores (with Rs. 15,000 Cr as Central Component & Rs 8,123 Cr as State component) and is to be implemented from 1st July 2021 to 31" March 2022.

ICMR-NIV has conducted in-vitro laboratory assays to determine the neutralization potential of variant strains of SARS-CoV-2 in comparison to the standard strain with D614G mutation. Similar studies have also been done by other laboratories across the world. Data of in-vitro laboratory neutralization assays is as follows:

In case of Alpha variant, the baseline titres of neutralizing antibodies are high in both Covishield and Covaxin.

In case of Delta variant, the baseline titres of neutralizing antibodies are very high in Covishield and significantly high in Covaxin. These are sufficient to neutralize the delta variant strain for both the vaccines.