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

LOK SABHA UNSTARRED QUESTION NO.3012 TO BE ANSWERED ON 06th August, 2021

PRIMARY TRANSMISSION ROUTE OF CORONAVIRUS

3012 SHRI MARGANI BHARAT:

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

- (a) whether the Government has taken cognizance of the recent publication in 'The Lancet' which indicates that there is a strong evidence that the primary transmission route of Coronavirus is airborne, if so, the details thereof;
- (b) whether the second wave in the country was caused due to airborne transmission of the COVID-19 virus, if so, the details of public health measures taken in this regard by the Government in coordination with States/UTs;
- (c) whether the Government is aware that six experts from US, UK and Canada identified some evidence which supports spread of Coronavirus through air;
- (d) if so, details of such evidence and the manner in which the Government proposes to plan ahead; and
- (e) the assessment of the Government about the third wave?

ANSWER

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

(a) to (e) 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 are as follows :

• With the intent to reduce the risk of cross infection to non-COVID patients a well as to maintain continuity of non-COVID essential health services in the country, 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.

• Government of India , to supplement the hospital facilities has roped in tertiary care hospitals under ESIC, Defence, Railways, paramilitary forces, Steel Ministry etc. 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 which was only 10,180 and 2,168 before the first lockdown (as on 23rd March 2020) is being enhanced continuously and is currently at 18,03,266 isolation beds and 1,24,598 ICU beds (as on 3rd August,2021).

• There are 2808 labs reporting to ICMR for COVID-19 testing and they have tested 46.96 crore samples. 1373 diagnostic kits have been evaluated out of which 673 have been recommended. Also, the testing kits and equipment have been made available on Government e-Marketplace (GeM) for procurement by States.

• The daily liquid medical oxygen (LMO) supply, which was about 1292 MTs per day in February 2021 increased to 8593 MTs in April 2021. On 28th May 2021, a total of 10,250 MTs of LMO was allocated to the states. This was done by enhancement of LMO production in steel plants as well as in other LMO plants. Restrictions were imposed on industrial use of oxygen.

• A dynamic and transparent framework for allocation of medical oxygen in consultation with States/UTs and all the stakeholders such as relevant Ministries, manufacturers/suppliers of liquid oxygen etc. was prepared.

• 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 25th September 2020, and further revised and disseminated to States on 25th April 2021.

• 1,02,400 oxygen cylinders were procured in April and May of 2020 and distributed to States. Further orders for additional 1,27,000 cylinders have been placed on 21.04.2021 (54,000 jumbo cylinders (D type) and 73,000 regular cylinders (B type). Deliveries of the same have started and 73,352 cylinders have been delivered as on 3rd August 2021.

• To generate oxygen at the health facility level, PSA plants are being established in each district hospitals, especially in far flung areas enabling the hospitals to become self-sufficient in generation of oxygen for their needs and thereby, 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.

• 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.

• Remdesivir is a patented drug, manufactured in India under voluntary licenses granted by Gilead Life Sciences USA (the patent holder) to 7 Indian pharmaceutical companies. Manufacturing capacity was augmented from 38 lakh vials per month in March 2021 to nearly 122 lakh vials per month in June 2021. In addition, 40 additional manufacturing sites were approved by the CDSCO, thus increasing the manufacturing sites from 22 (in March 2021) to 62 (June 2021).

• All States /UT and State Drugs Controllers have been requested to verify stock of drugs and check other malpractices and take effective steps to curb hoarding and black marketing of some drugs like Remdesivir.

• Department of Pharmaceuticals and the Drug Controller General of India (DCGI) have actively coordinated with the industry to enhance availability of Amphotericin B through identification of manufacturers, alternate drugs and expeditious approvals of new manufacturing facilities.

• Besides, the existing five manufacturers, DCGI had issued permissions to manufacturing /marketing of Amphotericin B Liposomal Injection to six additional firms.

• The guiding principle to avert/ minimize the risk of future resurgence of COVID – 19 cases in the country remains the five fold strategy of test - track - treat - vaccinate and COVID appropriate behaviour.

• Ministry of Health and 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. Taking note of ingress of COVID-19 pandemic in peri-urban and rural areas, Ministry of Health & Family Welfare on 16 May, 2021 issued a SOP on COVID-19 Containment & Management in Peri- urban , Rural & Tribal areas.

• Further COVID-19 treatment protocols and advisories both for adults as well as paediatric age groups were issued and widely disseminated to promote rational use of drugs and oxygen.

• During the F.Y. 2019 -20, funds to the tune of Rs 1113.21 crore was released to the States /UTs under NHM towards management and containment of COVID-19 pandemic.

• In September 2020, the Union Government further allowed use of SDRF by the States for oxygen generation and storage plants in hospitals ; strengthening ambulance services for transport of patients ; and setting up containment zones , COVID-19 care centres. States were allowed 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 and 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 31st March 2022. So far Rs 1827.78 crore has been released to States/UTs in 2021. So far Rs 1827.78 crore has been released to States/UTs in 2021-22 under ECRP Phase-II in FY 2021-22.

• It includes support to State/UT level for ramping up Health Infrastructure including those in rural, tribal and peri-urban areas closer to the community, providing support for procurement of drugs and diagnostics to enhance service delivery at district and sub district level for management of a buffer of drugs, support for IT Interventions such as implementation of Hospital Management Information System and expanding access to tele-consultations in all districts, and support for capacity building and training for all aspects of management of COVID-19.

• Further, under the National COVID Vaccination Program, Government of India is procuring vaccines and providing them free of cost to States and UTs. As on 3rd August 2021, a total of about 50.21 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. States/UTs and Private Hospitals procured Covid vaccine.
