GOVERNMENT OF INDIA
DEPARTMENT OF ATOMIC ENERGY
LOK SABHA
STARRED QUESTION NO – 380
ANSWERED ON 26.03.2025

TREATMENT TO CANCER PATIENTS

*380. DR. RAJEEV BHARADWAJ:

Will the PRIME MINISTER be pleased to state:

(a) the efforts made by the Government to provide high quality treatment to cancer patients in the country;

(b) the details of the specific research work carried out for the treatment of cancer patients during the last five years;

(c) the details and the manner in which the functioning of the National Cancer Grid helps in treatment of the cancer patient; and

(d) the details of the centres and research institutions of National Cancer Grid, State-wise?

ANSWER

THE MINISTER OF STATE FOR PERSONNEL, PUBLIC GRIEVANCES AND PENSIONS AND PRIME MINISTER'S OFFICE (DR. JITENDRA SINGH):

(a) to (d) A statement is laid on the Table of the House.

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Government of India
Department of Atomic Energy

STATEMENT REFERRED TO IN REPLY TO PARTS (A) TO (D) IN RESPECT OF LOK SABHA STARRED QUESTION NO. 380 FOR REPLY ON 26.03.2025 REGARDING "TREATMENT OF CANCER PATIENTS" BY DR. RAJEEV BHARADWAJ.

(a) Tata Memorial Centre (TMC) an aided institute under the aegis of Department of Atomic Energy (DAE), has been providing high quality cancer care at an affordable cost by following unique model of 60:40 ratio under which 60% patients received treatment at highly subsidized or almost free treatment and rest 40% are private patient pay for their care. The rates for even the private patients are low compared with the rates as charged by the private hospitals in the country. Further, the details of specific measures being implemented by TMC to ensure that patients receive high-quality cancer care are as below:

1) Resource stratified guidelines for management of cancers based on the cost-effectiveness and infrastructure availability.
2) The guidelines are linked with Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) to ensure quality of care delivery to the AB-PMJAY beneficiaries.
3) Standardization of diagnosis by National Cancer Grid (NCG) surgical pathology quality assurance program, which helps ensuring correct diagnosis at all the participating centres.
4) Quality improvement programme which train the centres in improving quality of all the care pathways.
5) Group negotiation for all the high-value anticancer drugs resulting in a median 82% price reduction leading to improvement in access and affordability of drugs.
6) Training of health-care professionals including nurses, pathologists and technicians from across the country to deliver high quality cancer care.
7) Virtual Tumour Boards to provide inputs on diagnosis and treatment from a multidisciplinary team of cancer experts for all the complex cancer cases at any of the cancer centers at any location.

(b) The details of the specific research work carried out for the treatment of cancer patients during the last five years is as below:

1) Optimization of treatment of childhood acute lymphoblastic leukemia to increase cure rates - the largest trial done till date anywhere in the world.

2) Repurposing of drugs (aspirin, metformin and curcumin) to provide cost-effective treatment options for common cancers.
3) Training the early career oncologists in conducting high-quality cancer research. Till date more than 400 oncologists have been trained.
4) Setting a priority agenda for cancer research and collaborating with ICMR (with joint matched funding) to fund the country-relevant research questions. These include the following:
    i) Reduce burden of patients presenting with advanced disease
    ii) Improve access, affordability and outcomes in cancer care via solution-oriented research
    iii) Country-level health economic assessment of cancer interventions and technologies
    iv) Quality improvement and implementation research
    v) Leverage technology to improve cancer control supported by robust scientific evidence
5) The large yoga randomized clinical trial proved that Yoga increases the quality-of-life and cure rates in women with breast cancer with 15% relative improvement in Disease-free Survival (DFS) and 14% in Overall Survival (OS) after yoga intervention (Nair NS, et al).
6) CAR T-cell therapy:
    i. Collaboration between TMC and IIT (B) to develop the first indigenous CAR T Cell Therapy Product.
    ii. The first CAR-T Cell therapy for a patient of acute lymphoblastic leukemia in India was performed on June 4, 2021 at ACTREC.
    iii. The first CAR T Cell Therapy for a patient of lymphoma was performed on June 21, 2021 in TMH.
    iv. The above 2 trials led to approval and commercialization of the indigenously developed CAR T product from DCGI in December 2023

(c)&(d) The National Cancer Grid (NCG) was created in 2012 with the broad vision of delivering high-quality and uniform standards of cancer care to all the patients across India. Now the NCG has grown to a large network of 340 cancer centres, research institutes, patient advocacy groups, charitable organisations and professional societies. Between the member organisations of the NCF, the network treats over 850,000 new patients with cancer annually, which is about 60% of all of India's cancer burden. Incorporating all stakeholders of cancer care in Indian, it is a strong, unified and powerful voice in the fight against cancer.

The details of steps taken by NCG for cancer care is as below:

i) Expansion of network from 17 centres to 320 centres across all the States and Union Territories (state-wise list at https:/ncgindia.org)

ii) Establishment of Koita Centre of digital oncology (funded by a Charitable Foundation) to leverage digital technologies to improve cancer care from prevention to treatment. This is in complete alignment with Ayushman Bharat Digital Mission.

iii) Integrated data collection & aggregation – a "National Cancer Database to guide all the cancer policies and national cancer control plan. Initial databases established for five common cancers.

iv) Partnering with digital tech companies to deliver cancer care near to patient's home.

v) Initiation of national tumor tissue biobank across NCG to understand the cancer causation, identification and development of new anticancer treatment and preventive technologies.

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