

GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
RAJYA SABHA
QUESTION NO 09.11.2010
ANSWERED ON
DEATHS DUE TO JAPANESE ENCEPHALITIS

13

Smt. Maya Singh

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

- (a) whether it is a fact that the immunization against Japanese encephalitis could not be taken up this year because its vaccine got spoilt during its storage as a result of which the disease spread widely leading to increased fatality among children;
- (b) the number of deaths due to this disease and the age group of the people afflicted with this disease, State-wise during the last three years; and
- (c) the facilities provided by the Central Government during the last three years to affected States to tackle this disease?

ANSWER

THE MINISTER OF HEALTH AND FAMILY WELFARE

(SHRI GHULAM NABI AZAD)

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

STATEMENT REFERRED TO IN REPLY TO RAJYA SABHA STARRED QUESTION NO. 13 FOR 9TH NOVEMBER, 2010

.....

(a) No, Sir

(b) The number of deaths reported due to Acute Encephalitis Syndrome (AES)/Japanese Encephalitis (JE) during the last three years in the country, state-wise, is annexed. Epidemiologically, the most susceptible age group of people inflicted with AES/JE is between 1 to 15 years with insignificant variations in other age groups. However, the trend is slightly different in Assam and Manipur where about 70% and 56% cases respectively, have been reported in adult age group.

(c) The measures taken by the Central Government during the past three years to support the affected states to tackle Japanese Encephalitis cases, are as under :

1. Immunization against Japanese Encephalitis in JE Mass Vaccination Drives followed by integration of JE Vaccine in Universal Immunization Programme in the select districts of affected states
2. Fifty one Sentinel sites for laboratory diagnosis have been established across the country. JE test kits have been provided to these sites by Government of India through National Institute of Virology (NIV) Pune.
3. For laboratory diagnosis of Acute Encephalitis Syndrome for viral etiology, a field unit of National Institute of Virology (NIV), Pune (a specialized research institution of Indian Council of Medical Research) at Gorakhpur was set up in 2008-09.
4. A Sub-office of the Regional Office of Ministry of Health & Family Welfare, Government of India, was set up at Gorakhpur in 2007-08 to coordinate with districts and State health authorities for surveillance, field visits and improvement of prevention and control of the disease and close monitoring of Japanese Encephalitis cases. Besides, a Vector Borne Disease Surveillance Unit (VBDSU) with fund support from Government of India was set up at BRD Medical College, Gorakhpur, in 2007-08 for carrying out sero epidemiological and entomological studies in the field and for close coordination with district authorities.
5. An amount of Rs.5.88 crore was provided to BRD Medical College, Gorakhpur, in 2008-09 by Government of India for upgradation of JE Epidemic Ward in the College. 6. An amount of Rs.54.51 lakh has been sanctioned by Government of India during 2010-11 for setting up of a Physical Medicine &

Rehabilitation (PMR) Department at BRD Medical College, Gorakhpur to address the problems of disabilities among children affected by AES/JE

7 During 2008-09 and 2009-10, 453 medical officers, clinicians, chief medical officers and districts malaria officers were trained on surveillance and case management in all the 14 JE endemic states under NVBDCP.

8. An Expert Group on Acute Encephalitis like syndromes has been constituted under the chairmanship of Secretary, Department of Health Research and Director General, ICMR to identify priority areas of research including finding the cause(s) of AES. The expert group has identified the following areas for research and development of techniques for simultaneous detection of pathogens, known to be causative agents of encephalitis, novel pathogen discovery approaches and studies on host immune response of causative agents of encephalitis. Detailed proposals on these have been invited from the shortlisted investigators.