## GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:356
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ERADICATION OF TB
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## Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the Government are aware that TB attacks more people than AIDS, sexually transmitted diseases, malaria, leprosy and tropical diseases combined together each year;
- (b) if so, the data available with the Union Government in this regard;
- (c) the specific steps taken by the Government for the control and eradication of TB:
- (d) the reasons for not controlling TB effectively;
- (e) whether there is any proposal to involve the private sector to control the disease;
- (f) if so, the details thereof; and
- (g) the success achieved by the Government in controlling the disease?

## **Answer**

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA)

(a)&(b): There are early indications of reduction of TB incidence and deaths in India. In addition, the epidemiology of some of the other diseases like HIV/AIDS is changing. Therefore, at this stage, although TB is a major public health problem in the country, it does not attack more people than AIDS, STD, malaria, leprosy and tropical diseases combined together each year.

Every year an estimated 18 lakh people in India develop TB and about 4.17 lakh people die of it.TB kills more people in Indiathan any other infectious disease.

(c)&(d): To control Tuberculosis, National TB Control Programme (NTCP) has been in operation since 1962As the programme did not make any significant epidemiological impact in its almost three decades of implementation, it was reviewed by an Expert Committee in 1992. Major shortcomings found in the Programme were as under:

- Inadequate budget and insufficient managerial capacity
- Shortage of drugs
- Emphasis on x-ray diagnosis resulting in inaccurate diagnosis
- Poor quality sputum microscopy
- Multiplicity of treatment regimens

On the recommendations of the above Committee, Revised National TB Control Programme (RNTCP) widely known as DOTS whic is a WHO recommended strategy, is being implemented in a phased manner, with the objective of achieving a cure rate of 85% of new sputum positive cases and to detect at least 70% of such cases. It takes care of the above shortcomings. The emphasis is on diagnosis by sputum microscopy instead of by X-ray. This helps in detective and curing infectious cases on priority. Drugs are provided for full course of treatment in patient-wise boxes. Treatment of all patients is monitored closely. To make the Programme more effective, NGOs, Private Practitioners and Medical Colleges are being involved.

(e)&(f): Under Revised National TB Control Programme (RNTCP) to increase the access to TB care services in the country guidelines for involvement of NGOs and private practitioners have been evolved and widely disseminated. At present more than 550 NGOs and more than 2000 Private Practitioners (PPs) are involved in RNTCP.

(g): RNTCP districts have reported treatment success rate of more than 85%, which means that 8 out of every 10 TB patients diagnosed and put on treatment under revised strategy are being successfully treated as against less than 4 in the previous programme.

Till date more than 25 lakh patients have been put on treatment under DOTS Programme resulting in saving of more than 4.5 lakhs

additional lives. More than 740 million population in 414 districts have already been covered and it is envisaged to cover 850 million by 2004 and the entire country by 2005 under RNTCP.	