

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

UNSTARRED QUESTION NO:2267
ANSWERED ON:17.12.2003
PULSE POLIO PROGRAMME
PUTTASWAMY GOWDA

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

- (a) the total amount spent by the Union Government on Pulse Polio programme during the last three years, year-wise;
- (b) whether children taking Oral Polio drops are not fully protected from this disease;
- (c) if so, the details thereof alongwith the reasons therefor; and
- (d) the concrete action plan drawn by the Union Government to eradicate polio from the country?

Answer

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

(a) The amount spent by Union Government on Pulse Polio Programme are as under:

Year Rs.in crores.

2000-2001	396
2001-2002	398
2002-2003	443

(b) & (c) Oral polio vaccine is effective for protecting against the polio disease. However, no vaccine is 100% effective. In case of polio vaccine, small proportion of children who have received vaccine may get the diseases in area where wild poliovirus circulation is intense. Therefore the programme is to interrupt the poliovirus circulation so that all children are protected.

(d) There has been substantial improvement in polio situation this year and polio eradication has reached a crucial stage, as only 190 confirmed cases have been reported till 22.11.2003.

India is committed to obtain polio free certification by 2007. The meeting of the ninth India Expert Advisory Group (IEAG) was held on 18-19th November, 2003 at New Delhi with an objective to review the status of polio eradication in India and to recommend the strategy to be adopted in the country for Polio Eradication during 2004-06. In order to contain the spread of the virus and to eradicate polio, the India Expert Advisory Group for polio eradication have recommended the strategy to be adopted for the year 2004. Salient feature of recommendations.

1. Polio immunity gaps in endemic and risk states and also within states at districts level should be addressed.
2. Recommended strategy for year 2004 Five NIDs in January, February, April, October and November.

One SNID in May in 11 States Namely UP, Bihar, West Bengal, Haryana, Uttranchal, Delhi, Jharkhand, Gujarat, Rajasthan, Madhya Pradesh and Assam.

Mop-up round

1. Quality in chronically low performing districts to be improved.
2. The next 6 months is critical window of opportunity and needs high level of monitoring at all levels.
3. There should be political engagements from the highest level, especially in Uttar Pradesh.

4. Endemic states should report quantifiable data on routine immunization.