GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:1688 ANSWERED ON:16.08.2013 DENGUE CASES

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

- (a) whether a sudden spurt in the cases of dengue fever has recently been reported in the country;
- (b) if so, the details thereof and the reasons therefor indicating the number of such dengue related cases and deaths reported during the current year, State/UTwise;
- (c) whether the Government has issued any direction/advisory to follow the established protocol in dealing with the cases of dengue in the country;
- (d) if so, the details thereof and the implementation status of such direction/ advisory; and
- (e) the other measures being taken by the Government to keep the cases of dengue under control?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD)

(a)& (b) The number of reported cases and deaths due to dengue during current year in comparison to the corresponding period of last year is as under:

Year Comparative dengue situation till 31st July

2012 2013

Cases 8899 15983

Deaths 76 56

While the number of cases this year are more, the number of deaths have declined. State/UT-wise cases and deaths are at Annexure-I.

Dengue is an outbreak prone disease transmitted through mosquito bites. There is no single reason attributable to increase of dengue cases. It is governed by various man-made and environmental factors as under: -

- # unprecedented human population growth;
- # unplanned and rapid urbanization;
- # inadequate waste management;
- # water supply mismanagement including water scarcity/ interrupted supply;
- # increased distribution and densities of vector mosquitoes due to man-made, ecological and lifestyle changes;
- # gaps in public health infrastructure;
- # increase mobility of population;
- # poor infrastructure in the States to monitor vector mosquito breeding.

- (c) to (e): The Government has taken the following other measures for prevention and control of Dengue in the country: -
- # National guidelines for clinical management of cases have been sent to the states for circulation in all hospitals. These are also available on the website of NVBDCP.
- # Developed a Long Term Action Plan in January, 2007 and sent to the States for implementation.
- # In view of upsurge and geographical spread of dengue to newer areas, a Mid Term Plan has been developed for prevention and control of Dengue and approved by the Committee of Secretaries on 26th May, 2011. The plan has been sent to the states for implementation.
- # The dengue situation in the country is monitored and reviewed with States/UTs.
- # Field visits are carried out by technical experts from NVBDCP to assess the preparedness at the field level and to provide technical guidance to the States.
- # Training is imparted to clinicians on case management as per GOI guidelines and to other health care functionaries on programme activities.
- # ELISA based IgM test kits are provided to SSHs through National Institute of Virology, Pune free of cost. During current year (till 22.07.13), a total of 1097 dengue diagnostic kits (1 Kit= 96 tests) have been provided by Centre to SSHs.
- # Introduced ELISA based NS1 test for early detection of cases from 1st day of disease as distinct to IgM test which can detect the Dengue case after five days of disease.
- # Funds are provided to the States for prevention and control of vector borne diseases including Dengue to implement the public health activities.
- # Surveillance strengthened through 347 Sentinel Surveillance Hospitals (SSHs) Entomological surveillance strengthened.
- # Source reduction strengthened through domestic breeding checkers.
- # Focused IEC/BCC activities intensified.
- # Training for dengue case management and vector control organized at different levels.
- # For Outbreak Preparedness, Rapid Response Teams (RRTs) has been constituted at state and district levels.
- # Advisories for preventive action and preparedness have also been issued to State Government as detailed at Annexure-II.