

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

UNSTARRED QUESTION NO:1776

ANSWERED ON:16.08.2013

CASES OF JAPANESE ENCEPHALITIS .

Ganpatrao Shri Jadhav Prataprao;Khaire Shri Chandrakant Bhaurao;Nahata Smt. P. Jaya Prada;Rajbhar Shri Ramashankar;Shekhar Shri Neeraj;Singh Shri Yashvir

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

- (a) whether the Government has taken note of Japanese Encephalitis (JE) and Acute Encephalitis Syndrom (AES) related cases and deaths, particularly from Bihar, Maharashtra and Uttar Pradesh in the country;
- (b) if so, the number of such cases and deaths reported during each of the last three years and the current year, State/UT-wise;
- (c) the reasons for the annual recurrence of JE and AES in the country;
- (d) the details of the financial and technical assistance provided to the JE/ AES endemic States/UTs during each of the last three years and the current year, State/UT-wise; and
- (e) the fresh measures being taken by the Government to curb annual recurrence of encephalitis related cases and deaths in the country especially in Bihar, Maharashtra and Uttar Pradesh?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABIAZAD)

(a) to (c) Yes. Japanese Encephalitis/Acute Encephalitis Syndrome (JE/AES) cases and deaths reported during the last three years & current year, State/UT-wise are at Annexure-I. Some parts of the country are endemic for JE/AES due to climatic and ecological factors. JE has a complex eco-epidemiological cycle as its transmission involves multiple hosts and the mosquito that transmits the disease is outdoor resting and feeding thereby limiting the intensive vector control options. Similarly there are numerous etiological agents responsible for AES.

(d) & (e) Details of financial assistance provided to the JE endemic States during the last three years and current year under National Vector Borne Disease Control Programme (NVBDCP) for all Vector Borne Diseases is at Annexure-II.

The prevention and control of JE/AES is dealt under National Vector Borne Disease Control Programme (NVBDCP) under the overarching umbrella of National Rural Health Mission (NRHM). The Government, in October, 2012 approved an intersectoral programme for reduction of mortality, morbidity and disability in children due to JE/AES for 60 priority districts in 5 identified States (Uttar Pradesh, Bihar, West Bengal, Assam & Tamil Nadu).

The prevention and control strategy includes JE vaccination of children in campaign mode as well as routine immunization, disease surveillance through sentinel sites, early case detection and proper case management, integrated vector control and behaviour change communication. The strategy is primarily implemented by the State Governments. However, the Government of India provides technical support and supplements the efforts of the State Governments by providing funds and commodities as per the requirements of the States reflected in their Programme Implementation Plans (PIPs) under National Rural Health Mission (NRHM).

In Maharashtra too, the activities to prevent and Control JE are included in the Vector Borne Disease Control Programme in the State.