GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:399 ANSWERED ON:06.12.2013 ENCEPHALITIS RELATED CASES Jaiswal Shri Gorakh Prasad ;Muttemwar Shri Vilas Baburao;Rama Devi Smt. ;Shekhar Shri Neeraj;Singh Shri Yashvir;Tagore Shri Manicka;Vijayan Shri A.K.S.

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

(a) the number of Japanese Encephalitis (JE) and Acute Encephalitis Syndrome (AES) related cases and deaths reported in the country during each of the last three years and the current year, State/UT-wise;

(b) the details of the districts identified to be endemic for JE/AES in the country, State/ UT-wise;

(c) 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;

(d) the present status of the development of indigenous JE vaccine and the time by which the said vaccine is likely to be introduced in public health programmes in the country; and

(e) the fresh measures being taken by the Government to control recurrence of encephalitis related cases and deaths across the country?

Answer

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

(a): The state wise details of Japanese Encephalitis (JE) and Acute Encephalitis Syndrome (AES) cases and deaths in the country during last three years and current year is at Annexure-I

(b): There are 171 districts reported endemic for JE/AES from 18 states in the country. state wise details are at Annexure-II.

(c): The assistance to states are provided in an integrated manner for all vector borne diseases including JE/AES. The details of financial support to States under NVBDCP is at Annexure-Illa. Technical assistance is provided to the JE/AES endemic states through meetings and field visits. The details of field visits of higher officials are at Annexure-Illb.

Further due to high cases and deaths in the states like Uttar Pradesh, Assam and Bihar, additional funds were also released under NRHM Flexipool to strengthen the preventive and control measures to reduce the disease burden. The details of additional fund released under NRHM Flexipool to these states are annexed at Annexure-Illc

(d): The JE immunization in Public Health Programme currently uses live attenuated vaccine which at present is not produced in India.

(e): In view of high burden of JE/AES in 5 states, namely Assam, Bihar, Tamil Nadu, Uttar Pradesh and West Bengal which contributes more than 85% of JE/AES burden in the country, under national programme a multi pronged strategy for prevention and control of JE/AES for 60 high endemic districts of these 5 states with the convergence of following ministries has been started:

- (i) Ministry of Health & FW as a nodal ministry
- (ii) Ministry of Drinking Water Supply & Sanitation
- (iii) Ministry of Women & Child Development
- (iv) Ministry of Social Justice & Empowerment
- (v) Ministry of Rural Development
- (vi) Ministry of Urban Development.

Broadly, following measures have been recommended by GoM for Prevention and control of JE/AES

(i) Strengthening and expansion of JE vaccination in affected districts;

(ii) Strengthening of surveillance, vector control.

(iii) Strengthening of case management by setting 10 bedded pediatric ICU in 60 district hospitals and timely referral of serious and complicated cases;

(iv) Access to safe drinking water and proper sanitation facilities to the target population in affected rural and urban areas;

(v) Provision of adequate facilities for physical, medical, neurological and social rehabilitation;

Improvement of nutritional status of children at risk of JE/AES and intensified IEC/BCC activities.