

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

UNSTARRED QUESTION NO:872

ANSWERED ON:27.02.2015

VECTOR BORNE DISEASES

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

- (a) the number of cases of malaria, dengue, chikungunya, Japanese encephalitis, kala-azar and other vectorborne diseases and attributable deaths reported in the country during the current year, disease and State/UT-wise;
- (b) the details of the measures taken along with the financial and technical assistance provided and utilised to deal with vector-borne diseases during the said period, State/UT-wise;
- (c) whether a few cases of blindness caused by dengue virus has been reported from certain parts of the country and if so, the details thereof; and
- (d) the other measures being taken by the Government to ensure adequate treatment to the patients and prevent mosquitoes breeding in hospitals and other public places in the country?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA)

(a): The number of cases and deaths due to malaria, dengue, chikungunya, Japanese encephalitis (JE), kala-azar and Lymphatic Filariasis is at annexure:- I

Lymphatic Filariasis is not a fatal disease and death due to Chikungunya has not been reported in India.

(b): Government of India is implementing National Vector Borne Disease Control Programme in the country for pre-vention & control of six vector borne diseases namely Malaria, Japanese Encephalitis, Dengue, Chikungunya, Kala-azar and Filaria. The States/UTs implement the programme activities and the technical guidance as well as financial assistance is provided by Government of India. The general strategy for prevention & control of Vector Borne Diseases is as below:

- i) Malaria cases are detected by active and passive surveillance with the help of direct microscopy or Rapid diagnostic kits and are treated as per guideline.
- ii) Kala-azar cases are also detected by active search and passive surveillance with the help of RDK and all positive cases are treated by single dose of Inj. Liposomal Amphotericin-B or combination of drugs.
- iii) Integrated Vector Management including Indoor Residual Spray (IRS), Anti-larval measures including use of bio-larvicides, use of larvivorous fish and use of Long Lasting Insecticidal Nets (LLINs).
- iv) Supportive Interventions including Behavior Change Communication, Capacity Building and Monitoring & Evaluation.
- v) Vaccination against J.E.
- vi) Annual Mass Drugs Administration (only for Lymphatic Filariasis).

Details of financial assistance provided and utilized by the state government during the current year State/UT- wise is at annexure:- II

(c): Dengue virus infection may sometime involve various organs like liver, kidney, heart, brain and eyes and may cause blindness. However, no confirmed case of blindness due to dengue has been reported in India.

(d): Diagnostic & treatment facilities are provided in all government health institutions including hospitals and further supported under National Health Mission through ASHAs'. For prevention of mosquitoes breeding in hospitals and other public places, source reduction through Information Education and Communication involving communities and health care functionaries and engineering methods are carried out. In addition, anti larval activities using chemical, bio-larvicide, larvivorous fish are also carried out.