GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:877 ANSWERED ON:24.07.2015 Cancer Cases

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

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- (a) whether as per a recent study, breast cancer has replaced cervical cancer as the leading cause of cancer deaths among women, while deaths due to lung cancer topped the list for men in the country, if so, the details thereof and the reasons therefor;
- (b) the number of different kinds of cancer cases and attributable deaths reported in the country as compared to the global ratio during each of the last three years and the current year, gender and State/ UT-wise;
- (c) the steps being taken by the Government for prevention, early detection and free/affordable treatment of cancer along with the funds allocated and spent for the purpose during the said period, State/UT-wise;
- (d) whether the Government has taken note of a new telomeres test which can predict cancer up to thirteen years before the disease develops in the body; and
- (e) if so, the details thereof and the steps taken/proposed to be taken by the Government to make such advanced cancer detection tests available in the country?

Answer

(a): As per the data provided by Indian Council of Medical Research (ICMR), the estimated deaths due to breast cancer and cervical cancer are about 16.3% and 24.17% respectively among all anatomical sites (in females). This indicates that the mortality due to cancer breast has not exceeded that of cancer cervix.

Further, as informed by ICMR, estimated deaths due to lung cancer account for about 14.7% of all cancers in males and is the leading cause of death among males.

The increase in the number of cancer cases in the country may be attributed to larger number of ageing population, unhealthy life styles, use of tobacco and tobacco products, unhealthy diet, better diagnostic facilities etc.

(b): The estimated number of incidence for all anatomical sites of cancer in the country for the last three years and the current year gender and state/UT wise is given in Table 1 & 2. The attributable cancer deaths for the same years are given in Table 3 & 4.

The estimated figures of cancer incidence and mortality for the India, based on the 'Report on Time Treads for all sites of cancer – 2012' by Indian Council of Medical Research and the estimated figures of cancer incidence and mortality for the world by 'GLOBOCAN for all sites of cancer – 2012' by International Agency for Research on Cancer are at Table 5.

(c): Central Government supplements the efforts of the State Government for improving healthcare including prevention, diagnosis and treatment of Cancer. At present, the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) being implemented under National Health Mission (NHM) for interventions upto the district level includes awareness generation for Cancer prevention, screening, early detection and referral to an appropriate level institution for treatment. The focus is on three areas namely breast, cervical and oral Cancer. Screening guidelines have been provided to State Governments for implementation. Suspected cases are to be referred for confirmatory diagnosis by various tests including histo-pathological biopsy.

Government of India has approved "Tertiary Care for Cancer" Scheme under National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) in the year 2013-14. Under the said scheme, Government of India will assist to establish/set up 20 State Cancer Institutes (SCI) and 50 Tertiary Care Cancer Centres (TCCC) in different parts of the country. The maximum assistance inclusive of State share for SCI is upto Rs.120 crore and for TCCC is upto Rs.45 crore subject to eligibility as per scheme guidelines and availability of funds.

The treatment for cancer in Government Hospitals is either free or subsidized. In addition to Cancer diagnosis and treatment by the State Governments Health Institutes, the Central Government Institutions such as All India Institute of Medical Sciences, Safdurjung Hospital, Dr Ram Manohar Lohia Hospital, PGIMER Chandigarh, JIPMER Puducherry, Chittaranjan National Cancer Institute, Kolkata,

etc. provide facilities for diagnosis and treatment of Cancer.

Oncology in its various aspects has focus in case of new AllMS and many upgraded institutions under Pradhan Mantri Swasthya Suraksha Yojna (PMSSY). Setting up of National Cancer Institute at Jhajjar (Haryana) and 2nd campus of Chittranjan National Cancer Institute, Kolkata has also been approved.

The list of medicines specified in the National List of Essential Medicines (NLEM) which are included in the First Schedule of Drug Pricing Control Order (DPCO), 2013 also contain drugs used for the treatment of Cancer. NLEM (drug formulations) medicines for which ceiling prices have been notified under DPCO, 2013, includes47 anti-Cancer medicines. No person is authorized to sell any such formulation to any consumer at a price exceeding the ceiling price fixed by the National Pharmaceutical Pricing Authority (NPPA) under Ministry of Chemicals & Fertilizers.

Financial assistance to Below Poverty Line (BPL) patients is available under the Rashtriya Arogya Nidhi (RAN). Besides this, the Health Minister's Cancer Patient Fund (HMCPF) within the Rashtriya Arogya Nidhi has been set up in 2009 wherein 27 erstwhile Regional Cancer Centres (RCCs) are provided with revolving funds to provide immediate financial assistance upto Rs.2.00 lakh to BPL Cancer patients.

Details of funds released under NPCDCS and Tertiary Care for Cancer scheme during the last three years and current year is at Table 6 and Table 7.

(d) & (e): As per information provided by Indian Council of Medical Research, some news items suggest that a new test can predict development of cancer. However, there are other factors that cause telomeres shortening besides cancer and in absence of large studies, findings cannot be validated as a diagnostic test.