

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

UNSTARRED QUESTION NO:2446

ANSWERED ON:25.07.2014

GUIDELINES ON VECTOR BORNE DISEASES

Birla Shri Om;Charitra Shri Ram;Gandhi Shri Dilip Kumar Mansukhlal;Joshi Shri Pralhad Venkatesh;Mahtab Shri Bhartruhari;Roy Prof. Saugata;Singh Shri Kunwar Haribansh

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

- (a) whether the Government has issued fresh directions/guidelines for prevention and control of dengue, malaria and other vector-borne diseases during monsoon season in the country and, if so, the details thereof;
- (b) the mechanism put in place by the Government to ensure implementation of the above directions/guidelines;
- (c) whether the Government has drawn any plan for treatment of vector-borne diseases through Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) system of medicines;
- (d) if so, the details thereof and if not, the reasons therefor; and
- (e) the other pre-emptive measures taken/proposed to be taken by the Government for prevention and control of dengue, malaria and other vector-borne diseases in the country?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN)

(a): The advisories for prevention and control of dengue, malaria and other vector borne diseases under the Directorate of NVBDCP have been issued to:

i. To all States Programme Officers on 17th April, 2014. ii. To all Directors Health Services on 5th May, 2014.

The advisories include, inter alia, the following aspects:

i. Source reduction activities, elimination of breeding place. ii. Antilarval activities with the use of larvivoracious fish, Bio-larvicides and Chemicals. iii. Availability of drugs and diagnostics and vector control logistics iv. IEC activities for community participation. v. Inter sectoral coordination and action.

(b): The Government of India monitors the implementation of prevention and control measures/ guidelines in the States/UTs under National Vector-Borne Diseases Control Programme through periodic meetings at national and State level as well as through the field visits by the officers from Directorate of National Vector-Borne Diseases Control Programme and Regional Offices of the Ministry of Health and Family Welfare. Besides, the performance of the States/UTs is also reviewed in the high level meetings with the State Mission Directors and State Health Secretaries.

(c) & (d): The States have been requested by Department of AYUSH and Department of Health & Family Welfare, Government of India, to use the expertise of AYUSH doctors for malaria control programme after proper training.

It is informed by Department of Ayush that the Central Council for Research in Ayurveda, Homoeopathy, Unani under Department of AYUSH have also patented and commercialized an anti-malarial drug AYUSH 64.

(e): In addition to funds provided to the States for prevention and control of vector borne diseases under National Rural Health Mission (NRHM), the measures taken by Government of India for prevention and control of vector-borne diseases include the following: Dengue/Chikungunya:

Developed a Long Term Action Plan and sent to the States for implementation in January, 2007. # National guidelines for clinical management of cases have been sent to the States for circulation in all hospitals. # Periodic reviews are carried out at higher level. # Field visits are carried out to assess the preparedness 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. # Focused IEC/BCC activities are carried out for awareness generation of the community at National and State level. # For augmenting diagnostic facilities the number of Sentinel Surveillance Hospitals (SSHs) with laboratory support has been increased to 394 across the country from 110 and linked with 14 Apex Referral laboratories with advanced diagnostic facilities for back up support. Test kits are provided to these institutes through National Institute of Virology, Pune free of cost. Malaria: # Continuous surveillance for detecting cases and providing radical treatment to positive cases at all levels including at community level through ASHA's. # Vector control by carrying out Indoor residual spray and distribution of LLIN in high endemic areas. # Community mobilization and intersectoral coordination for enlisting their participation. # Monitoring of situation through IDSP for detection of impending outbreaks. # Rapid response team at district level for immediate response in epidemic situation. JE/AES:

In view of high burden of JE/AES in 5 states, namely Assam, Bihar, Tamil Nadu, Uttar Pradesh and West Bengal which contribute around 85% of JE/AES burden in the country, a National Programme with a multi pronged strategy for Prevention and Control of JE/AES in 60 high endemic districts of these 5 States has been started in 2012-13 involving following Ministries /Department:

- (i) Ministry of Health & FW
- (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 Housing and Urban poverty alleviation.

The following measures are part of the National programme 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 up 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; vi. Improvement of nutritional status of children at risk of JE/AES vii. Intensified IEC/BCC activities.

Kala-azar:

Advisories are issued from Directorate of NVBDCP and Ministry of Health & Family Welfare to States for undertaking timely and quality Indoor Residual Spray (IRS). # Officials from Directorate of NVBDCP are reviewing kala-azar Programme and IRS from time to time. # A single dose drug for treating Kala-azar has also been introduced in the Programme.