## GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:1146 ANSWERED ON:28.11.2014 CASES OF TB AND MDR TB Anwar Shri Tariq;Kodikunnil Shri Suresh;Scindia Shri Jyotiraditya Madhavrao;Singh Shri Dushyant;Singh Shri Rama Kishore

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

(a) whether India accounts for the highest number of TB and MDR-TB cases and also missed TB cases in the world and if so, the details thereof and the reasons therefor, State/UT-wise;

(b) the number of cases of TB and MDR-TB and attributable deaths reported in the country during each of the last three years and the current year, State/UT-wise;

(c) the steps taken/proposed to be taken by the Government for identification and detection of missed TB cases and their proper treatment in the country;

(d) whether the Government has set any target to control/eliminate tuberculosis, and if so, the details thereof along with the action plan drawn by the Government and the funds earmarked and allocated for the purpose, State/UT-wise; and

(e) whether shortage of certain drugs for TB and drug resistant TB has been reported from various parts of the country, and if so, the details thereof along with the corrective measures being taken by the Government in this regard?

## Answer

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

(a): Yes. According to WHO Global TB Report, 2014, India accounts for the highest TB and MDR-TB cases in the world, in terms of absolute numbers. India accounts for 27 percent of the TB cases that are missed globally. On the basis of prevalence, India ranks 14th and on basis of incidence India ranks 15th among 22 high burden countries globally. However, due to the large population of our country, the same translates into a large number of cases. Details of number of TB and MDR-TB Cases are provided in Annexure A.

(b): Details are provided in documents annexed as Annexure B.

(c): The Government has issued an order that makes it mandatory for all care providers to notify every TB case being diagnosed or managed by them. Standards for TB Care in India (STCI) have been formulated to define uniform standards for TB Care and Control across all care providers.

The RNTCP is reaching out to garner support from partners, including NGOs, Private Practitioners and Medical Colleges in Public and Private Sector.

Central TB Division, in collaboration with National Informatics Centre, has developed a case based web based platform- 'Nikshay', for Surveillance of TB Cases.

(d): The World Health Organization has set targets for TB elimination by the year 2050 and India is working towards achieving the same.

The following key activities are envisaged during the 12th five year plan for achieving the objectives of RNTCP including universal access:

# Ensuring early and improved diagnosis of all TB patients, through improving outreach, vigorously expanding case-finding efforts among vulnerable populations, deploying better diagnostics, and by extending services to patients diagnosed and treated in the private sector.

# Improving patient-friendly access to high-quality treatment for all diagnosed cases of TB, including scaling-up treatment for MDR-TB nationwide.

# Re-engineering programme systems for optimal alignment with NRHM at block level and human resource development for all health staffs.

# Enhancing supervision, monitoring, surveillance, and programme operations for continuous quality improvement and accountability

for each TB case, with programme-based research for development and incorporation of innovations into effective programme practice.

Details of allocation, releases and expenditure (cash & kind) from 2012-13 onwards (upto 17.11.2014) is at Annexure C.

(e): No. There is no shortage of drugs, for Drug sensitive and Drug Resistant TB, reported under RNTCP.