

Kanyakumari to Kashmir, every junior doctor is demanding higher pay structure. Therefore, by raising these scales of pay, Government is not going to solve the problem.

At the cost of the common man, the Government of India is spending here and the problem is on the State Governments, on the other side. Therefore, I want to know from the Government of India whether you are going to have a uniform pay structure and education policy of the Government of India or whether you are going to take up this health programme as a national one. I want to know from the Government categorically.

**SHRI P. V. NARASIMHA RAO :** I wanted a discussion on this subject. I did not know that the hon. Member would start the discussion straightway. But one thing I would like to say. I am approaching this question from the other end. What is the idea of the Central Government running hospitals? We have got very few employees. Sometimes the tendency is somehow to square up matters by giving them whatever we think they want or they deserve or whatever. The State Governments may not think so and similar demands being made at the State level would cost so much to the State Governments that they have a grievance or a complaint against the Central Government.

All these difficulties can be got over by going to the root question whether we should run any hospitals at all ourselves. That again is matter for discussion. I am raising these points so that all these matters can be discussed in a dispassionate manner and not under the threat of strike or strike goes on or while the strike is going on but really on their own merit.

[*Translation*]

**Steps to Check Cancer**

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\*130. **DR. PRABHAT KUMAR MISHRA :**

**SHRI NIRMAL KHATTRI :**

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

(a) whether cancer cases are on increase and if so, the number of known cases in the country, during the last three years ;

(b) the preventive measures taken so far to protect people from this dreaded disease ;

(c) whether cancer control programme has been launched throughout the country to detect cancer at early stages ; and

(d) if so, the achievement so far ?

[*English*]

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) :** (a) to (d) A statement is given below.

**Statement**

It is roughly estimated that there are about 1.5 million cases of cancer in India and the incidence of cancer is generally on the increase. The number of known cancer cases in specialised cancer hospitals in India during the years 1983 to 1985 year-wise, for which the figures are available, is given below :—

Year	No. of known cancer cases
1983	44,020
1984	44,345
1985	36,768

A National Cancer Control Programme has been launched in India for primary prevention of cancer, diagnosis and treatment and distribution and extension of services through Regional Cancer Centres and Medical Colleges. Non-governmental organisations have also been involved in the programme. Realising that one third of the cancers are preventable and another one third can be cured with a high percentage of survival if detected early, the emphasis of cancer research has been on primary prevention of tobacco related cancer and secondary prevention of cancer of uterine cervix. The preventive measures include educating the masses, statutory warning on Cigarette packets and advertisements, promulgation of laws by several State Governments prohibiting smoking in closed areas like cinemas, buses, educational institutions, hospitals etc. An allocation of Rs. 20.00 crores has been made for the National Cancer Control Programme for the 7th Five Year Plan. A National Cancer Control Board has also been set up to guide the activities of the programme. The Government provides financial assistance to the 9 Regional Cancer Centres for their development and grants to State Governments/voluntary institutions for setting up of Cobalt Therapy Units and Early Cancer Detection Centres.

[Translation]

**DR. PRABHAT KUMAR MISHRA :**  
Mr. Deputy Speaker, Sir, in the reply the Government has accepted the fact that incidence of cancer is generally on the increase and at present, there are 15 lakh such patients in the country. According to the figures provided, between 1983 and 1985 only 1.25 lakhs of such cases have been reported in the hospitals. In 1983, 44 thousand cases were registered, in 1984 another 44 thousand were reported and in 1985 the number decreased to 35 thousand. The figures show that cancer cases are on the decline while the Government is stating that incidence of cancer is generally on the increase. I want to enquire from the hon. Minister as to what is the basis of compilation of these figures because through hospitals only information about 1.25 lakhs cases has been received. Secondly, it has been clearly mentioned in the reply that one third of the cancer cases are preventable if reasons are known and another one third can be cured with a high percentage of survival if detected early. I want to enquire whether one-third of the 15 lakh cases have been prevented and what steps have been taken in this regard?

**THE MINISTER OF HUMAN RESOURCE DEVELOPMENT AND MINISTER OF HEALTH AND FAMILY WELFARE (SHRI P. V. NARASIMHA RAO) :**  
Mr. Deputy Speaker Sir, firstly, I do not accept the figures which are with us as final. We keep on receiving and submitting figures. One of the reasons is that our reporting system is not so foolproof that we may depend upon it. Hence, we can think of these figures only as illustrative of certain things. They are neither exhaustive nor are they final. According to our survey, the figures keep on changing but that does not mean that the disease has been controlled. It might also imply that there is some lacuna in our own reporting. There might have been strikes in certain hospitals or due to some reason or the other, the figures may not be reaching us and there should be other reasons as well for the decrease in the cancer figures.

Therefore, first of all, I emphasise that we cannot consider these figures as final.

Again, it has been estimated that about one-third of the cases are preventable if they are properly diagnosed. Some cases cannot have an early cure. They have to wait. Only their pain can be reduced. All these things are being looked into. It is true that only recently more attention is being paid to it and I think that we will try to remedy the situation further in the coming years. I am aware that all cancer cases are not reported from the areas. I myself know that there are many cases in the villages about which the villagers are not aware that they are suffering from cancer. When they come to know of it and are sent to the dispensaries or to the district headquarters hospitals, it becomes too late for proper treatment. It is difficult to provide a solution to such situations. We have to do a lot in this regard and I am prepared to admit it.

**DR. PRABHAT KUMAR MISHRA :**  
Mr. Deputy Speaker Sir, I agree with the hon. Minister's views regarding figures but the difference between 1.25 lakhs and 15 lakhs is a bit too much. Such vast difference is quite strange. We put question on the basis of figures presented here.

Secondly, as the hon. Minister has said that cancer cases in the rural areas not detected. Cancer is such a disease that it is not detected easily and until the patient reaches the hospital or suffers physical pain he himself remains unaware of the disease by which he has been affected. He continues to suffer in this manner and when he reaches the hospital, as the hon. Minister has mentioned, then it is too late for effective treatment. I want to know as to how the people in rural areas are informed about this disease and what scheme has been drawn in this regard? It has been stated that warning is written on the cigarette packets. It is not written on the packets that cigarette smoking causes cancer. The word cancer is not mentioned at all. The statutory warning is that it is injurious to health. But the word 'cancer' has not been used in that.

[English]

**MR. DEPUTY SPEAKER :** They are uttering "injurious to health", that is

enough. Injurious to health means cancer also. They cannot put the names of all the diseases.

[Translation]

**DR. PRABHAT KUMAR MISHRA :** I am talking about the 15 lakh people. I wanted to know as to what are the methods of informing the people about this disease in the rural areas and the preventive measures that they should adopt against it. People have to spend much on the treatment of this disease. What are the media on which Govt. is spending money on educating the people about this disease ?

**SHRI P.V. NARASIMHA RAO :** I have already said that there are many shortcomings in it as this disease is not notifiable. It is not a contagious disease. As it is not notifiable, it is not necessary that we may be getting full information about this disease. We have recently started some new programmes. The figures which have just been presented in this connection cannot be taken as final. I have said that so far as I am aware, it is written on the cigarette packets that it can cause cancer.....(Interruptions).....I will ascertain that. That much is certainly written that it is injurious to health. You want that it should also be written that it causes cancer. Then the person who smokes cigarettes should know about this disease. [The word injurious can be understood easily but perhaps the word 'cancer' may not be understood by many people. However, the Government is actively considering the proposal and perhaps the word 'cancer' may be added to it. There is no difficulty in it, we will consider it.

**SHRI NIRMAL KHATTRI :** Mr. Deputy Speaker, Sir, it is clear from the hon. Minister's reply that he has properly understood this disease. Its treatment is very expensive and he may be knowing that it is not possible for a poor man to bear the expenses of a full course of its treatment. One-third cases can be cured if detected in the early stages and one-third of the cases can be treated even after the early stages are over. I want to ask

whether any scheme is being considered to supply the medicines used for the treatment of cancer free of cost or at subsidised rates ?

My second supplementary is whether the research work is being done in this regard in the Homeopathic and the Ayurvedic systems of medicine also and if so, whether it has yielded any results ?

**SHRI P.V. NARASIMHA RAO :** I want to inform the hon. Member that when this programme was formulated, we made efforts to spread it as far and wide as possible. Earlier it was limited to the cities but now it has spread to the block level. Training is being imparted to the workers. They are being trained to detect this disease in people. The people are told that if certain symptoms appear in them, then they should immediately rush to the doctor. It is possible that you are not able to understand this disease and may not be as ordinary as you may be thinking. We do not say at once that it is cancer because it would not be proper to say so. Hence, we try to give warnings in that regard.

So far as other systems are concerned, a specialist in the Homeopathic System of Medicine has come to us and has claimed that he has found a cure of cancer and has cured many people of it. I have referred him to the I.C.M.R. for verification. After they make an estimate of its effectiveness, a programme for making it popular will be worked out. I would reiterate that if a medicine for the cure of cancer is available under any system, it would be sent for examination and if it turns out to be S.S.P.; then we are prepared to encourage it fully.

**SHRI NIRMAL KHATTRI :** What is the reply to my question as to what is being done to supply those two medicines, which are being used, as free of cost or at subsidised rates to the people ?

**SHRI P.V. NARASIMHA RAO :** As in the case of other diseases, here too we are taking similar steps. We do not want that all the patients should purchase all

the medicines on their own. It is not so. In the Government dispensaries and hospitals cancer is treated like any other disease. Even C.T. Scanning facilities are available to them free of cost and the patients have not to face much difficulty in treatment.

**SHRI RAJ KUMAR RAI :** Sir, one hour has passed in answering just three questions.....(*Interruptions*)

[*English*]

**SHRI V.S. KRISHNA IYER :** Sir, in my constituency, namely, Bangalore there is a cancer institute. There the number of patients coming from rural areas is 99 per cent. A number of voluntary organisations and even the cancer institute carry on cancer detection camps but for want of resources they have not been able to carry out camps regularly in large numbers and particularly in rural areas. May I know from the Government whether they can extend financial support to voluntary organisations and also cancer detection camps to carry on detection particularly in rural areas?

**SHRI P.V. NARASIMHA RAO :** Within our own constraints we are doing everything. If there is anything more which could be done I will certainly look into it, I cannot give a specific answer to a question like this because there are eye camps and cancer camps. There are so many detection camps going on and they are being conducted by voluntary organisations. We are going to their help. You know that we are helping them but the help is not adequate. This is well-known.

[*Translation*]

**SHRI SHANTI DHARIWAL :** Mr. Deputy Speaker, Sir, would the hon. Minister provide that much of financial support to the States so that Cancer treatment methods like radio-therapy, chemotherapy etc. are made available at the district hospitals?

**SHRI NARASIMHA RAO :** First let us know the therapy which is most effective.

If we find out the one therapy, as I have already said, any system of therapy would be encouraged fully.

[*English*]

**SHRIMATI BASAVARAJESWARI :** Sir, I want to know . . . .

[*Translation*]

**SHRI RAJ KUMAR RAI :** Sir, the whole hour has passed in just three questions. We are thankful to you for such generosity but when would others get a chance?

[*English*]

**MR. DEPUTY SPEAKER :** I have called Shrimati Basavarajeswari. This is all about diseases. They want to discuss in detail.

Now, the Question Hour is over.

## WRITTEN ANSWERS TO QUESTIONS

[*English*]

### Guidelines to leprosy control and welfare service advisory boards

\*124. **SHRI R.M. BHOYE :** Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether the results of survey conducted about the incidence of leprosy have been analysed and if so, the broad conclusions thereof;

(b) whether the incidence is more in rural areas; if so, which particular sections are more prone to this disease and the causes identified therefor;

(c) whether Government have issued some new guidelines to the Leprosy Con-