

(a) whether according to a Lancet report, death toll from Malaria stands at 2 lakh annually which is actually 13 times more than WHO estimate;

(b) whether it is a fact that 90 per cent deaths were in rural areas where most of them did not receive medical attention and reportedly spending up to 80 per cent of their earning on their health care; and

(c) what steps Government proposes to take to increase health budget which has remained stuck at a little over 1 per cent of the GDP for years now inspite of chronic diseases like Malaria, Dengue, Diabetes, Cardiovascular diseases etc. showing a sharp increase?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) The estimated number of deaths due to malaria reported in British medical journal 'The Lancet' is not acceptable according to experts from the World Health Organisation, Indian Council of Medical Research and Directorate of National Vector Borne Disease Control Programme. The study published in the journal suffers from several methodological deficiencies.

(c) As per the Economic Survey 2009-10, expenditure on health sector was 1.45% of the GDP in 2009-10.

Deaths due to transfusion of infected blood

884. SHRI MAHENDRA MOHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the cases of deaths of a number of children/persons due to transfusion of infected blood have been reported in the country; and

(b) if so, the details thereof and the action taken by Government in the matter along with preventive measures proposed in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) No. As per reports received from States, there are no reported deaths of children/persons due to transfusion of infected blood in the country.

Under the existing provisions of drugs and Cosmetics Act, each unit of blood and blood products is mandatorily tested for HIV, Hepatitis B, Hepatitis C, Syphilis and Malaria and only blood units free from these infections are used for transfusion purposes. Before blood donation, every donor is physically examined and a Donor Deferral Form is filled to ensure that only safe donors donate blood in licensed blood banks in the country.

Study on prevalence of NDM-1

885. SHRI N.K. SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government has conducted any study on the prevalence of New Delhi Ometallo-beta-lactamase (NDM-1);
- (b) if not, the reasons therefor;
- (c) whether it is a fact that Japan has also confirmed a case of NDM-1; and
- (d) the steps taken by Government to verify/prove the existence or non-existence of the bug?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI S. GANDHISELVAN): (a), (b) and (d) In 2007, Indian Council of Medical Research initiated a 3 year surveillance study to monitor trends on the occurrence of beta lactamases in gram negative isolates. One of the study objective was to determine carbapenem resistance among strains tested. Based on two year data analysis, current prevalence of NDM-1 among Indian Medical Centres was low - 2% in 2008 and 4.5% in 2009.

- (c) This Ministry has no information on cases confirmed in Japan.

Proposal to revive Malaria Eradication Programme

886. SHRI T.K. RANGARAJAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government is aware of a tremendous increase in the number of persons affected by Malaria;
- (b) if so, the steps taken by Government to control Malaria;
- (c) whether there is any proposal to revive the earlier Malaria Eradication Programme;
- (d) whether Government is aware of the latest technique of using genetically engineered mosquitoes for vector control; and
- (e) if so, whether Government contemplates to use such techniques?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (c) The reported cases of malaria have come down from 17,85,129 cases in 2006 to 15.63,574 cases in 2009. However, National Vector Borne Disease Control Programme (NVBDCP) is being implemented throughout the country for control of malaria and check the spread of the disease. NVBDCP is an umbrella programme for prevention and control of six vector-borne diseases: malaria, filaria, dengue, chikungunya, kala-azar and Japanese Encephalitis. The main strategy for prevention and control of vector-borne diseases advocates for integrated vector control, early case detection and complete treatment, and behavior change communication. Government of India provides technical support and also supplements the efforts of States/UTs