

Cancer cases in India (2012) is 91694. The NCRP does not provide data estimates for the world. GLOBOCAN 2012 by International Agency for Research on Cancer estimates the number of Cervical Cancer cases in the World (2012) as 528000. The NCRP data indicates that Indian figures are 17.4% of the World estimates. However, estimated number of Cervical Cancer Cases in India by GLOBOCAN 2012 is 123000, which is 23.3% of the world.

The large population in India results in more number of Cervical Cancer cases. The Cervical Cancer is more common in low socio-economic status. Other attributable factors are high parity (more number of child birth), marriage at early age and poor genital hygiene *etc.*

(c) While Health is a State Subject, the 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 Rural Health Mission (NRHM) 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 for cervical cancer by VIA (Visual Inspection with Acetic Acid) technique have been provided to State Governments for implementation. Suspected cases are to be referred for confirmatory diagnosis through various tests including histopathological biopsy. For generating awareness, campaigns are also carried out through print and electronic media.

#### **Negligible prosecution of medical negligence cases**

3638. SHRI DEVENDER GOUD T.: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is negligible prosecution of medical negligence cases in the country;

(b) whether it is also a fact that there is no centralized collection of data on medical negligence cases filed in the country;

(c) in view of Health being the State Subject, whether the Ministry will direct the States to maintain such data at State level and compile the same at the Central level so as to reduce medical negligence in the country; and

(d) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) Health is a State subject and States are empowered to take appropriate action in prosecuting the medical negligence cases as per their respective State Legislations. Medical Council of India may also take *suo-moto* action as per "The Indian Medical Council (professional Conduct, Etiquette and Ethics) Regulations, 2002".

(b) to (d) Data relating to medical negligence cases is not maintained centrally. However, Medical Council of India (MCI) and State Medical Councils are empowered to take disciplinary action against doctors for violation of the provisions of Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002 and accordingly initiate appropriate action against the doctors if found guilty of professional misconduct/medical negligence. Such data is maintained by the MCI and respective State Medical Councils.

#### **Upgradation of hospitals under PMSSY in Uttar Pradesh**

3639. SHRI AMBETH RAJAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government has identified any Government hospital in Uttar Pradesh to be upgraded in the 1st phase of the Prime Minister Swasthya Suraksha Yojana (PMSSY); and

(b) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) and (b) Government of India has taken up upgradation of two Medical Colleges, viz. Sanjay Gandhi Postgraduate Institute of Medical Sciences (SGPGIMS), Lucknow and Institute of Medical Sciences (IMS), Banaras Hindu University, Varanasi in the 1st phase of PMSSY, at an approved outlay of ₹120 Crore (contribution of Ministry of Health and Family Welfare-₹ 100 Crore and State/Institute share-₹ 20 Crore). Under the Upgradation Programme, a 150 bedded Super Speciality Block has been built at SGPGIMS, Lucknow and a 334 bedded Trauma Centre at IMS, BHU, Varanasi.

#### **Medical check up for school children**

3640. SHRI C.P. NARAYANAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government will implement a project of arranging medical examination of children when they are admitted in school in the first standard since many children and youth meet with untimely death due to very late diagnosis of the diseases from which they suffer; and

(b) whether Government contemplates to chalk out a plan to make such scheme a part of NRHM?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) and (b) Yes, Sir. Under National Health Mission, the Government of India is implementing Rashtriya Bal Swasthya Karyakram (RBSK) for screening of all the children from 0-18 years of age including school children for 4 Ds i.e. Defects at birth, Deficiencies, Diseases and Development delays including disability.