

(b) if so, the details thereof and, if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The goals have to be achieved by 2015.

Millennium Development Goal 4 pertains to reduction of child mortality and sets a target of reducing mortality among children under 5 by two-third between 1990 and 2015. This translates into under 5 mortality rate goal for India as 42 per thousand live births and IMR goal as 28 per thousand live births. India is well on path to attain this if the current rate of reduction continues.

MDG 5 target is to reduce maternal mortality ratio by three quarters between 1990 and 2015. This translates to reducing the MMR from 560 in 1990 to 140 in 2015. India's MMR is likely to reach 141 if current rate of annual decline continues.

#### **Rising cost of medical expenditure**

1031. SHRI BASAWARAJ PATIL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware of the fact that medical and the healthcare expenditure is touching the sky day-by-day;

(b) if so, the steps taken by Government to check rising cost of medicine and healthcare expenditures; and

(c) the details of preventive steps taken by Government to avoid unnecessary medical expenditure by adopting preventive measures?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The impact of rising healthcare expenditure has been engaging the attention of the Government. The Government has taken several steps to provide accessible affordable and accountable health care facilities to all sections of the people that, *inter-alia* include:

- Initiatives under the National Health Mission (NHM) with a view to provide accessible affordable, accountable, effective and quality healthcare services especially to the poor and vulnerable sections of the population. Primary health care in India is provided free of cost in the public sector through a nationwide network of Community Health Centres (CHCs), Primary Health Centres (PHCs) and Sub Centres (SCs).

- Free care is provided for family welfare services.
- Janani Shishu Suraksha Karyakaram (JSSK) envisages free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home for all pregnant women delivering in public health institutions.
- National Urban Health Mission (NUHM) with focus on primary health care needs of urban population particularly slum dwellers and other marginalized groups in view of increase in migration and urbanization.
- Implementation of programmes for control of communicable and non-communicable diseases.
- Mainstreaming of Indian System of Medicine and Homoeopathy.
- Making available tertiary health care services in public sector through strengthening of hospitals, establishment of AIIMS institutions and up-gradation of existing Government medical colleges across the country.
- Providing free medicines under various national health programmes like Anti-Malaria and Anti-TB Programmes.
- Rashtriya Swasthya Bima Yojana (RSBY) to provide smart card based cashless health insurance including maternity benefit cover of up to ₹ 30,000/- per annum on family floater basis to Below Poverty Line (BPL) families (a unit of five) in the unorganized sector.
- Making available quality generic medicines at affordable prices to all, country-wide, under the 'Jan Aushadhi Campaign'.
- A National List of Essential Medicines has been published with the purpose of promoting rational use of medicines considering the three important aspects *i.e.* cost, safety and efficacy.
- National Pharmaceutical Pricing Policy as well as the Drug Price Control Order, 2013 have been notified to regulate the prices of essential medicines.

(c) The Government have also taken several steps in the direction of preventive health care, which *inter-alia* include Universal Immunization of children against 7 diseases; Pulse Polio Immunization; Family Planning Services; Maternal and Reproductive Health Services; Child Health Services that include both home based and facility based New

born Care; Adolescent Reproductive and Sexual Health (ARSH) services; Investigation/screening and treatment for Malaria; Kala-azar, Filaria, Dengue; Japanese Encephalitis and Chikungunya; Detection and treatment for Tuberculosis including MDRIB; Detection and treatment for Leprosy; Detection, treatment and counseling for HIV/AIDs; Cataract surgery for Blindness control.

Further, under Rashtriya Bal Swasthya Karyakram (RBSK) support is being provided to States/UTs for child health screening and early intervention services through early detection and early management of common health conditions classified into 4 Ds *i.e.* Defects at birth, Diseases, Deficiencies, Development delays including disability. A comprehensive National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases and Stroke (NPCDCS) for activities including health promotion, early detection and treatment of Cancer, Diabetes, Cardiovascular diseases and Stroke, has also been initiated.

#### **Misuse of oxytocin**

1032. DR. CHANDAN MITRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware of large scale misuse of the banned oxytocin injection administered to cattle by dairy owners and also to increase the size of vegetables and fruits by farmers in the country especially in Madhya Pradesh;

(b) whether Government has made any assessment of ill effects of its repeated use on the health of both consumers and animals;

(c) if so, the details thereof; and

(d) the steps taken by Government to check the manufacture and sale of oxytocin through clandestine channels and also for continuous surveillance in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) There have been some reports in the Media regarding misuse of oxytocin injection. However, scientific data on the extent of such practices is not available

(b) and (c) The Indian Council of Agricultural Research (ICAR) has informed that no ill effects have been observed in the animals in experiments carried out on use of oxytocin.