

the States for prevention and control of dengue, including clinical management of dengue cases. Periodic reviews are done at the level of Hon'ble HFM, Secretary, H&FW and DGHS. Advisories were issued including one from Hon'ble HFM to all Chief Ministers. Focused IEC/BCC activities are carried out at National and State level with media mix strategies focusing on source reduction and personal protective measures. Situation is monitored through the reports and by visiting the Hospitals. Diagnosis is provided through Sentinel Surveillance Hospitals (SSHs) and Apex Referral laboratories across the country. Funds are provided by Government of India to the States for prevention and control of vector borne diseases including Dengue to implement the public health activities.

Transfer of paramedical staff of CGHS Ayurvedic dispensary

2681. SHRIMATI VIPLOVE THAKUR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the names of paramedical staff in CGHS Ayurvedic transferred outside Delhi for the last five years;
- (b) the number of requests received till date; and
- (c) the reasons for transfer of AYUSH pharmacist from Delhi to Lucknow (Uttar Pradesh) when other requests are pending and senior pharmacists are still waiting for transfer from outside Delhi?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per the records, Sh. Prateek Gupta, Ayurvedic Pharmacist was transferred from CGHS, Delhi to CGHS Lucknow on 10.11.2015.

(b) As per records, no other such request has been received in the office of the Director, CGHS .

(c) The transfer of Sh. Prateek. Gupta, Pharmacist (Ayurvedic) from CGHS, Delhi to CGHS, Lucknow was considered on humanitarian grounds *i.e.* medical illness of his parents residing in Lucknow.

Operationalisation of new CGHS Wellness Centres

2682. SHRI D.P. TRIPATHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether it is a fact that new CGHS Wellness Centres will be opened in 11 new cities (including one in each of the North Eastern States);

(b) if so, how many of these new Wellness Centres are now operational and which are those;

(c) whether there is a time-frame given by the Ministry as to when the Wellness Centres should become operational and the details thereof;

(d) whether any of them are running behind schedule, if so, the details thereof; and

(e) the reasons behind the delay and what the Ministry plans to do to rectify it?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Yes. An order was issued on 17.11.2014 for opening of CGHS Wellness Centre in every State capital where CGHS was not in operation including the North Eastern States.

(b) CGHS Wellness Centre Gandhinagar, Gujarat has become operational.

(c) to (e) Since opening of CGHS Wellness Centres depends on the availability of suitable accommodation, no time frame was given. Details of present status regarding opening of these Wellness Centres are given in Statement.

Statement

Status of opening of the Wellness Centres in 12 new cities

State	City	Status
Gujarat	Gandhinagar	CGHS Wellness Centre has become operational
Chhattisgarh	Raipur	Government accommodation has been allotted. Renovation work is under progress.
Himachal Pradesh	Shimla	Accommodation has been identified
Arunachal Pradesh	Itanagar	State Government agreed to provide 2 rooms
Goa	Panaji	Pursuing with AIR for accommodation
Tripura	Agartala	Advertisement for accommodation issued
Manipur	Imphal	Advertisement for accommodation is being issued
Mizoram	Aizawl	2nd time Advertisement for accommodation issued

State	City	Status
Nagaland	Kohima	Rented accommodation has been identified
Sikkim	Gangtok	Pvt. Accommodation available, rent is being assessed by CPWD
Puducherry - UT	Puducherry	State Government allotted accommodation
Madhya Pradesh	Indore	Building is being renovated

Drug resistant bacteria and viruses

2683. SHRIMANSUKHL. MANDAVIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the updated list of bacteria/viruses found in the country that have shown signs of drug resistance in various studies carried out by ICMR or other agencies during the last three years along with reasons coming into light for said resistance as this is a serious threat to precious human life; and

(b) whether Government intends to send advisory to State Governments to curb the tendency of advising unnecessary antibiotics to patients thereby making them drug resistant, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) Bacteria which have acquired drug resistance recently to commonly used antibiotics are E.coli, Klebsiella, Enterobacter (ESBL- Producers and Carbapenem-resistant); Pseudomonas aeruginosa and Acinetobacter species (pan-drug resistant); Staphylococcus aureus (Methicillin-resistant - MRSA); Enterococcus (Vancomycin resistant -VRE); Typhoidal Salmonella and Shigellasp; Neisseria gonorrhoeae; Neisseria Meningitidis and M. tuberculosis (MDR).

Primary reason for emergence of drug resistance in common bacterial pathogens is overuse of antibiotics in humans and misuse of antibiotics for growth promotion purposes among livestock animals and farming. Other reasons are non-compliance of infection control practices, and lack of awareness among health care practitioners and at community level.

(b) The Government is aware of high rate of antimicrobial resistance to common pathogens of public health importance. A National programme on containment of antimicrobial resistance under Twelfth Five Year Plan has been launched which aims to