

Tuberculosis Report, 2015, for the year 2014, deaths due to TB were estimated in India to be 220,000 which is higher than any other country. However, this high number is because of our large population even though the incidence, prevalence and mortality due to TB in India has been consistently declining over the last 15 years and India has also achieved the Millennium Development Goals and has halved the prevalence and mortality as compared to 1990 levels. Among the 22 high burden countries in the world India ranks 16th in death rate attributable to TB.

(b) Allocation for the Revised National Tuberculosis Control Programme is part of the National Health Mission communicable disease flexipool. The actual expenditure by the programme during the past four years is given in Statement.

***Statement***

*Expenditure under Revised National Tuberculosis Control Programme*

(₹ in crore)				
Sl. No.	Year	Actual Allocated by the MOHFW (BE)	RE	FE
1.	2012-13	710.15	557.15	467.00
2.	2013-14	710.15	500.00	516.76
3.	2014-15	710.15	640.00	640.00
4.	2015-16	640.00	640.00	640.00
TOTAL		2770.45	2337.15	2263.76

**Prevalent of Ebola virus in the country**

602. SHRIMATI RENUKA CHOWDHURY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has seen a recent report of the National Institute of Virology (NIV) which states that Asian Ebola virus is active in almost all States;

(b) if so, the details thereof alongwith the number of persons succumbed to the virus in the country so far, State-wise including Andhra Pradesh and Telangana; and

(c) the preventive steps taken by Government to check the spread of the disease further?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) Indian Council of Medical Research, has informed that as of now, there is no term called Asian Ebola virus and National Institute of Virology has not conducted any research study on Asia Ebola Virus.

**Updation of cancer data collection capacity**

603. SHRI HUSAIN DALWAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the Ministry does not have access to cancer data after the year 2011;
- (b) if so, what are the reasons for the same;
- (c) whether the latest National Health Profile uses cancer data from a 2013 ICMR report; and
- (d) what steps are being taken by the Ministry to update its data collection capacity for cancer data?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (d) As reported by Indian Council of Medical Research, National Centre for Disease Informatics and Research is a nodal agency for cancer registry. It routinely collects data for Cancer Registry Programme. NCDIR-National Cancer Registry Programme has published a report on the data of 2009-2011 from Population Based Cancer Registries (PBCRs) in the year, 2013.

Population Based Cancer Registration is a complex process. This involves active cancer registration wherein staff has to go to different sources for collection of data elimination of duplicate registration, confidentiality issues, matching with death due to cancer as well as cause mortality also takes time.

The latest edition of National Health Profile-2015 used the data from National Cancer Registry Programme, Indian Council of Medical Research (ICMR) Three Year Report of Population Based Cancer Registries (PBCR): 2009-2011 (Report of 25 PBCRs in India) (February, 2013) on Incidence and Distribution of Cancer.

The systematic collection of data on cancer is being carried out by various Population Based Cancer Registries (PBCRs) across India under the National Cancer Registry Programme of ICMR since 1982. National Cancer Registry Programme has 58 sites. All 27 erstwhile Regional Cancer Centres are part of Cancer Registry Programme.