

Rapid rise in surgeries performed under NHM

1062. SHRI SANJAY RAUT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the number of surgeries conducted under the NHM are growing hugely during the last five years, if so, details thereof;

(b) whether health experts caution that there may also be the possibility of "inappropriate" surgeries being performed under existing insurance and incentive-based schemes like RSBY and JSSK; and

(c) if so, Government's observation therein and reaction thereto?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Based on the Health Management Information System (HMIS) data, there is no huge growth of surgeries during the last five years. However, due to improvement in the health facilities more people are opting for availing hospital services.

(b) and (c) No such report has been received from health experts. Under RSBY, there are provisions for hospitalization for major/minor surgeries. There were some complaints in the past relating to hysterectomy in Bihar and Chhattisgarh. Government has taken certain preventive measures so that there are no unnecessary surgeries, Government of India has issued directions to all states that for all hysterectomy operations on women of less than 40 years of age, be performed by the hospitals only with prior approval (authorization letter) from the Insurance Company.

Controlling menace of AES

1063. SHRI BAISHNAB PARIDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the status of deaths caused by encephalitis (AES) in the country especially in Odisha region and how far has it been controlled;

(b) whether UP, Bihar, Assam, Odisha and West Bengal are the major regions where this problem has been going up unabated; and

(c) what are the various initiatives that have been taken to control this menace in Odisha region and other such backward areas in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) 1207 people died due to acute encephalitis syndrome (AES) in 2015 as per

the report received from the JE/AES endemic states. As per the report received from SPO (VBD) Odisha, total 660 AES cases, and 2 deaths have been reported during 2015. The control measures taken by the state are given in the Statement (*See* below).

(b) No. There is reduction in no. of encephalitis (AES) deaths from 1719 in 2014 to 1207 in 2015 in the country. No. of deaths in Uttar Pradesh, Bihar, Assam and West Bengal and Odisha during 2014 and 2015 is given below:

States	Cases during 2015	
Uttar Pradesh	627	479
Bihar	355	90
Assam	360	260
West Bengal	348	351
Odisha	*	02

*No report received from SPO (VBD), Odisha

(c) To control the menace following strategies have been recommended under National Vector Borne Disease Control Programme:

- Regular disease surveillance
- Testing of blood samples
- Vector surveillance followed by fogging operation

Case management

- Strengthening of early case reporting and management
- Improving surveillance
- Capacity Building

Prevention

- Improving coverage of vaccination
- Safe drinking water supply
- Provision of sanitary latrines
- Improved habitation of Pigs
- Vector Control (IRS/LLIN)
- IEC/BCC

Statement***Control Measures Undertaken by SPO (VBD), Odisha***

- Disease surveillance has been strengthened for close monitoring of emergence of any sign of acute neurological illness.
- Inter Personal Communication (IPC) has been strengthened for early case detection and referral of cases to DHH/Tertiary care hospital (particularly in tribal areas) where health seeking practice is poor and traditional healers influence and co-habitation of domestic pigs.
- CDMOs of the reporting districts have been alerted for track and managing the AES and JE cases report to labs at the earliest and take needful preventive measure in the vulnerable villages.
- RMRC, BBSR ensures periodic screening of samples and confirms the absence of any new cases since November, 2011.
- State send alertness with any emergence of any new cases and case management at DHH and tertiary care hospitals of the State.
- Use of mosquito net by the community through strict vigil by ASHA, AWW and MPHW.
- Vector-surveillance is continuing with the help of VCRC field station at Koraput.

Drug-resistant TB cases

1064. SHRI A.U. SINGH DEO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number of cases of drug-resistant TB (DR-TB) in India;
- (b) whether Government has acquired Bedaquiline for DR-TB, if so, details thereof;
- (c) the estimated requirement of the drug for the next year, procurement policy and accessibility to patients in the private sector, if not, reasons therefor;
- (d) the measures undertaken to increase engagement of patients and communities in TB control efforts; and
- (e) whether Government plans to waive the import duty for essential diagnostics and consumables for drug resistant TB, if so, the details thereof and, if not, reasons therefor?