

subject. Under the National Health Mission, support is being provided to States/UTs to strengthen their healthcare systems to provide accessible, affordable and quality health care to all the citizens. Moving towards Universal Health Coverage wherein people are able to use quality health services that they need without suffering financial hardship is a key goal of Twelfth Plan.

(b) to (d) The Government has announced in the budget for the year 2016-17 to launch a new health protection scheme which will provide health cover up to ₹ 1 lakh per family per year for poor and economically weak families. For senior citizens' of age 60 years and above belonging to this category, an additional top up package upto ₹ 30,000 will be provided.

Senior Citizen Health Insurance Scheme has already been implemented w.e.f. 01.04.2016.

The proposal for implementation of new Health Protection scheme, as announced by the Finance Minister, in his budget speech 2016-17 is under consideration, for implementation during 2017-18.

Shortage of drugs for HIV treatment

1781. SHRI A.K. SELVARAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is a shortage of drugs for HIV treatment in the country;

(b) if so, the details thereof;

(c) whether it is also a fact that the persons with HIV had to return empty handed after at least one visit to the ART centre; and

(d) if so, the steps taken by Government to make availability of drugs for treatment of HIV in all ART centres across the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI ANUPRIYA PATEL): (a) and (b) There is no shortage of drug for HIV treatment in the country. The stock report of ARV drugs as on 21st July, 2016 is given in Statement (*See* below).

(c) There have been occasional reports about non - supply of ARV drugs to patients. However these relate mainly to those drugs are used by a small no.

of patients and are not procured centrally by National AIDS Control Organization. In case of short stocks of any drug arrangements are made by relocation from other centres in the State or from other States to ensure that no patient returns without ARV drugs.

(d) NACO has strengthened its supply chain mechanism by appointing Regional Procurement & Logistic Coordinators at regional level. In addition to this, an inventory management system (IMS) has been developed and implemented at all ART centres. This is an online system in which the pharmacist at ART centre maintains daily stock and record of consumption of drugs. The same are then monitored at SACS & NACO level. It is also worthwhile to mention that Project Director SACS have standing instruction to procure the drugs from open market whenever shortage for Antiretroviral drugs arises.

Statement

Stock Report for ARV drugs as on 21.07.16 is as below

Sl.No.	ARV Drugs	Monthly Consumption	Balance as on 21.07.2016	Stock Available for months
1	2	3	4	5
1st Line of ARV Drugs				
1.	Tenovovir + Lamivudine + Efavirenz	118,50,022	283,29,405	2.39
2.	Zidovudine + Lamivudine + Nevirapine	238,92,450	868,98,628	3.64
3.	Zidovudine + Lamivudine	23,53,752	80,10,988	3.40
4.	Tenofovir+ Lamivudine	7,60,879	33,98,367	4.47
5.	Nevirapine	5,79,738	62,07,672	10.71
6.	Efavirenz	11,17,472	120,57,094	10.79
2nd Line of ARV Drugs				
7.	LPV/r (Lopinavir/Ritonavir)	3,11,627	15,41,418	4.95
8.	ATV/r (Atazanavir)	5,46,422	42,42,457	7.76

1	2	3	4	5
Paed. ARV Drugs				
9.	ZLN (paed.)	9,79,402	56,50,965	5.77
10.	ABC+3TC AL (paed.)	14,22,895	54,05,271	3.80
11.	Efavirenz (paed.)	3,33,528	28,34,356	8.50
12.	Nevirapine (paed.)	6,28,348	27,15,772	4.32
13.	Zidovudine + Lamivudine (paed.)	4,05,211	21,64,663	5.34
14.	LPV/r (paed.) (Lopinavir/Ritonavir)	4,54,634	23,92,376	5.26
15.	LPV/r Syrup. (Lopinavir/Ritonavir)	1,036	9,724	9.39

Increase in respiratory diseases in people

†1782. SHRI MEGHRAJ JAIN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware of the fact that according to researchers of Institute of Science, Nagpur and Gurukul Kangri University, Haridwar pollen particles from plants carried in air are causing allergy, asthma and respiratory diseases among people;

(b) whether the main cause of it is the plants themselves becoming sick due to excessive use of chemical pesticides which in turn are spreading such diseases; and

(c) if so, whether any special plan has been made or is being made to deal with this problem, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI ANUPRIYA PATEL): (a) As per study conducted in two different educational institutes in Haridwar, by Padma Singh. S. Priyanka Chaudhary and Raina, Department of Microbiology, Kanya Gurukul Campus, Gurukul Kangri

†Original notice of the question was received in Hindi.