such incidents under the appropriate legal framework applicable in the respective State/UT. Details of such cases is not maintained centrally.

(d) Government have constituted a Committee to examine various aspects of a uniform legislative framework to prevent assault on clinical establishments and doctors on duty.

Further, Union Ministry of Health and Family Welfare have issued an advisory to all States/UTs to consider immediate measures for inculcating an effective sense of security among the doctors on duty, as under:

- (i) Security of sensitive hospitals to be managed by a designated and trained force;
- (ii) Installation of CCTV cameras and round the clock Quick Reaction Teams with effective communication/security gadgets particularly at Casualty, Emergency and areas having high footfalls;
- (iii) Well-equipped centralized control room for monitoring and quick response;
- (iv) Entry restriction for undesirable persons;
- (v) Institutional FIR against assaulters;
- (vi) Display of legislation protecting doctors in every hospital and police station;
- (vii) Appointment of Nodal Officer to monitor medical negligence;
- (viii) Expeditious filling up of vacant posts of doctors and para medical staff in hospitals/Primary Health Centres to avoid excessive burden/pressure on doctors and to maintain global doctor-patient ratio;
- (ix) Better infrastructural facilities and medical equipment and provision of extra monetary incentive for the doctors and para medical staff serving in hard/remote areas as compared to major and metro cities with better career prospects, etc.

## **Mortalities from AES**

1860. DR. ANIL AGRAWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number of children who died due to Acute Encephalitis Syndrome (AES) in the country, State-wise and district-wise;
- (b) the details of assistance given by State Governments and Central Government in this regard so far; and

(c) the action taken by the State Government and Central Government to control this disease in future?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) District-wise details of deaths due to Acute Encephalitis Syndrome (AES) in 2019 in respect of Bihar as on 02.07.2019 is given in Statement-I and in respect of other States, as on 30.06.2019, is given in Statement-II (*See* below).

- (b) and (c) As per Constitutional provisions, 'Health' is a State subject. However, Union Ministry of Health and Family Welfare (MoHFW) have taken measures to support State in containment of AES cases as follows:—
  - Union Health and Family Welfare Minister (HFM) had reviewed the situation with Health Minister of Bihar and also with officials from Ministry.
  - > MoHFW had deputed a Central team of experts consisting of Public Health Specialist from various Central Government Institutes to assist the State Government in containment and management measures.
  - ➤ HFM visited Bihar along with Minister of State (HFW) and team of officers. HFM reviewed the situation and also visited Shri Krishna Medical College and Hospital, (SKMCH), Muzaffarpur.
  - ➤ MoHFW deployed another high level multi-disciplinary team to Muzaffarpur drawing senior Paediatricians from various Central Government Institutes to advise state in their efforts to manage the cases. Epidemiologists from National Centre for Disease Control (NCDC), senior paediatricians, Laboratory technicians from central level are present in Muzaffarpur since 12th June, 2019.
  - > Strategic Health Operations Centre (SHOC) facility of NCDC was activated to monitor the AES situation in Muzaffarpur and co-ordinate tasks at the field level.
  - MoHFW had further deputed 5 teams of Doctors along with technicians from Central Government Hospitals to SKMCH to support clinical management.
  - Central team consisting experts from Indian Council of Medical Research (ICMR) was also deployed at SKMCH. The team is also scrutinising and reviewing the case records of discharge and deceased patients using a standardised tool to know the reasons for mortality.

Orientation training of all paediatricians of SKMCH on clinical case management and treatment protocol of AES was conducted on regular basis by the Central Team of paediatricians.

Further, National Vector Borne Disease Control Programme (NVBDCP) is working for Prevention and Control of Japanese Encephalitis (JE) which is one of the important cause of AES. Under NVBDCP, Sentinel sites report number of AES cases and also confirm Japanese Encephalitis (JE) by testing of samples (Serum/CSF) by IgM Mc ELISA kits provided by Government of India. Numbers of Sentinel sites have gradually been increased from 51 in 2005 to 142 at present. Apex Laboratories increased from 12 to 15 for testing of non JE pathogens in AES cases and quality control. 355 JE Kits have been supplied in 2019 as on 30.06.2019.

Advisories for preparedness and action plan for Prevention and Control of JE/ AES were also issued from NVBDCP on 13.02.2019 and 22.05.2019.

Statment-I District-wise number of AES deaths in Bihar during 2019 (till 02.07.2019)

Sl. No.	District	Deaths
1.	Begusarai	1
2.	Bhagalpur	4
3.	Bhojpur	1
4.	East Champaran	24
5.	Jehanabad	1
6.	Munger	1
7.	Muzaffarpur	96
8.	Patna	2
9.	Samastipur	2
10.	Saran	1
11.	Sheohar	2
12.	Sitamarhi	10
13.	Vaishali	15
14.	West Champaran	2
	Total	162

Statement-II State wise and District-wise number of AES deaths during 2019 (till 30.06.2019)

Unstarred Questions

State	District	Deaths
Assam	Cachar	1
	Darrang	2
	Goalpara	4
	Jorhat	11
	Kamrup (R)	3
	Kamrup (M)	2
	Lakhimpur	1
	Morigaon	1
	Total Assam	25
Uttar Pradesh	Basti	2
	Gorakhpur	6
	Hardoi	1
	Kushinagar	4
	Maharajganj	1
	Siddharth Nagar	2
	Sultanpur	1
	Total Uttar Pradesh	17
West Bengal	Alipurduar	1
	Cooch Behar	2
	Darjeeling	2
	Denajpur (N)	3
	Denajpur (S)	1
	Hoogly	1
	Howarh	3
	Jalpaiguri	1
	Kolkata	1
	Murshidabad	1
	Total West Bengal	16

State	District	Deaths
Jharkhand	Ranchi	2
Maharashtra	Gondia	1
Manipur	Senapati	1
Odisha	Keonjhar	1

## Zika Virus

- 1861. SHRIMATI VANDANA CHAVAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) the cases of Zika Virus that have been detected in India in the last three years, State-wise;
  - (b) whether cases of Zika Virus have been detected amongst pregnant women;
  - (c) whether cases of microcephaly or Guillain-Bare syndrome have been detected;
- (d) the surveillance adopted and action plan of Government in order to detect outbreaks of Zika Virus; and
- (e) whether there are any vaccines approved by Government, available to prevent the Zika Virus from spreading, if so, the details thereof and if not, progress on their development and expected thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) The State-wise details of laboratory confirmed cases of Zika Virus diseases reported for the years 2016 to 2018 are as under:—

States/UTs	2016	2017	2018
Gujarat	1	2	1
Tamil Nadu	0	1	0
Madhya Pradesh	0	0	130
Rajasthan	0	0	159
Total	1	3	290

- (b) Yes.
- (c) No cases of microcephaly and Guillain-Barre syndrome due to Zika have been detected.