

under the Ministry of Health and Family Welfare nor Drugs Control Organisation, Rajasthan, which are mandated with the task of ensuring safety, efficacy and quality of drugs including notified medical devices, has received any such complaint in this regard.

Two bid system is adopted by Central Government Hospitals. Further, in order to ensure quality of medical equipment procured, these hospitals adopt a series of measures which include framing of specifications for getting quality equipment, taking demonstration of equipment as per desired specification, review of past performance, post supply inspection after satisfactory installation, etc. Further, such procurements are made in accordance with General Financial Rules, guidelines of the CVC (Central Vigilance Commission) and public procurement policy(including GeM) issued by Government of India from time to time.

#### **C-section births in the country**

1399. SHRI PRABHAKAR REDDY VEMIREDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government is aware that C-Section births in the country has doubled in the last decade;
- (b) whether annual increase of C-Sections in India is almost twice the global average;
- (c) if so, how Government looks at this 'rapid' rise in C-Sections and what steps it is taking/proposed to take to bring this to the WHO approved level;
- (d) whether it is a fact that C-Section births are associated with short-term and long-term risks and affect health of woman, child and future pregnancies;
- (e) if so, whether Government contemplates removing caesareans from Ayushman Bharat; and
- (f) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) and (b) As per the National Family Health Survey, birth by Caesarean Section (%) in the country has increased from

8.5% as per NFHS-3 (2005-06) to 17.2% as per NFHS-4 (2015-16) (annual data for NFHS is not available). The increase in C-Section births is contributed largely by the private sector. Whereas C-Section rate in public sector has reduced from 15.2% in 2005-06 to 11.9% in 2015-16, the C-section rate in the Private sector has increased from 27.7% in 2005-06 to 40.9% in 2015-16.

The increase in C-Sections in India is almost the same as the global average. The data published in Lancet (2018; Volume 392, Pg:1341 -1348) from 169 countries that include 98.4% of the world's births, 21% births occurred through C-Sections in 2015, which was almost double the number of births by this method in 2000.

(c) Health is a State subject. However, MoHFW has taken the following steps to curb the rise in C-section:

- Conveyed the WHO Statement to all States/UTs urging them to share the same with all Obstetricians and Gynaecologists working in public health facilities in their respective States/UTs.
- Collaborated with Federation of Obstetrician and Gynaecologists in India (FOGSI) to share the WHO statement on C-section among all members.
- All CGHS empanelled hospitals are directed to display the information regarding ratio of deliveries by caesarean section.
- Under "LaQshya"- Labour room and maternity OT Quality Improvement Initiative, Caesarean section audit has been implemented in all LaQshya certified public health facilities to ensure that Caesarean sections are undertaken judiciously in only those cases requiring such surgical interventions.
- Government of India has also launched the Midwifery Initiative to promote natural birthing and ensure a positive child birthing experience.

(d) Caesarean section is one of the most common surgeries in the world and is also a life saving surgery for the mother and the child if medically indicated. However as in other surgeries, caesarean section deliveries also have inherent risk of surgical and anaesthetic complication. This procedure could also lead to short-term and long-term health effects for women and children.

(e) and (f) There is no proposal to remove Caesarean Section from Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (ABPMJAY). These packages are required for meeting the need of safety and health of woman and child. The utilization of these packages is monitored both at the Central and State level.

**Research journals and activities in medical sciences**

1400. SHRI RAKESH SINHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the steps Government has taken to encourage research in medical sciences; and
- (b) whether the AIIMS, New Delhi publish any research journal and if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) Various steps have been taken by the Government to encourage research in medical sciences through intra-mural and extra-mural schemes and projects, covering areas of communicable and non-communicable diseases, reproductive health, nutrition, human resource development, infrastructure, medical devices, biomedical devices and biomaterials.

(b) Yes. The All India Institute, of Medical Sciences, New Delhi publishes 'National Medical Journal of India'. This is published six times a year.

**Line of treatment protocol against Coronavirus**

1401. DR. PRABHAKAR KORE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government is taking fullfledged preventive measures with respect to Coronavirus outbreak;
- (b) if so, details of the preventive measures and number of people under observation for Coronavirus in the country, State-wise; and
- (c) the details of line of treatment adopted for treating people under observation for Coronavirus?